## FFY 2021 Quality Progress Report (QPR) California

The Quality Progress Report (QPR) collects information from states and territories (hereafter referred to as lead agencies) to describe investments to improve the quality of care available for children from birth to age 13. This report meets the requirements in the Child Care and Development Block Grant (CCDBG) Act of 2014 for lead agencies to submit an annual report that describes how quality funds were expended, including the activities funded and the measures used to evaluate progress in improving the quality of child care programs and services.

For purposes of simplicity and clarity, the specific provisions of applicable laws printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text. The lead agency acknowledges its responsibility to adhere to the applicable laws regardless of these modifications.

The contents of this document do not have the force and effect of law and are not meant to bind the public in any way. This document is intended only to provide clarity to the public regarding existing requirements under the law or agency policies.

#### **QUALITY PROGRESS REPORT**

The Quality Progress Report (QPR) collects information from lead agencies to describe investments to improve the quality of care available for children from birth to age 13. This report meets the requirements in the Child Care and Development Block Grant (CCDBG) Act of 2014 for lead agencies to submit an annual report that describes how quality funds were expended, including the activities funded and the measures used to evaluate progress in improving the quality of child care programs and services. Lead agencies are also required to report on their Child Care and Development Fund (CCDF) quality improvement investments through the CCDF plan, which collects information on the proposed quality activities for a three-year period; and through the ACF-696, which collects quarterly expenditure data on quality activities.

The annual data provided by the QPR will be used to describe how lead agencies are spending a significant investment per year to key stakeholders, including Congress, federal, state and territory administrators, providers, parents, and the public.

Specifically, this report will be used to:

- Ensure accountability and transparency for the use of CCDF quality funds, including a set-aside for quality infant and toddler care and the stabilization grants funded by the American Rescue Plan (ARP) Act funding;
- Track progress toward meeting state- and territory-set indicators and

- benchmarks for improvement of child care quality based on goals and activities described in CCDF Plans; and
- Understand efforts in progress towards all child care settings meeting the developmental needs of children
- Inform federal technical assistance efforts and decisions regarding strategic use of quality finds.

What Period Must Be Included: All sections of this report cover the federal fiscal year activities (October 1, 2020 through September 30, 2021), unless otherwise stated. Data should reflect the cumulative totals for the fiscal year being reported, unless otherwise stated.

What Data Should Lead Agencies Use: Lead agencies may use data collected by other government and nongovernment agencies (e.g., CCR&R agencies or other TA providers) in addition to their own data as appropriate. We recognize that lead agencies may not have all of the data requested initially but expect progress towards increased data capacity. The scope of this report covers quality improvement activities funded at least in part by CCDF in support of CCDFactivities. Lead agencies must describe their progress in meeting their stated goals for improving the quality of child care as reported in their FFY 2019-2021 CCDF Plan.

#### How is the QPR Organized?

The first section of the QPR gathers basic data on the population of providers in the state or territory and goals for quality improvement and glossary of relevant terms. The rest of the report is organized according to the ten authorized uses of quality funds specified in the CCDBG Act of 2014:

- 1) Support the training and professional development of the child care workforce
- 2) Improve the development or implementation of early learning and developmental guidelines
- 3) Develop, implement, or enhance a quality rating improvement system for child careproviders
- 4) Improve the supply and quality of child care for infants and toddlers
- 5) Establish or expand a lead agency wide system of child care resource and referral services
- 6) Support compliance with lead agency requirements for licensing, inspection, monitoring, training, and health and safety
- 7) Evaluate the quality of child care programs in the state or territory, including how programs positively impact children
- 8) Support providers in the voluntary pursuit of accreditation
- 9) Support the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
- 10) Other activities to improve the quality of child care services supported by

outcomes measures that improve provider preparedness, child safety, child well-being, or kindergarten-entry.

The Office of Child Care (OCC) recognizes that quality funds may have been used to address the coronavirus 2019 (COVID-19) pandemic. These activities should be reflected in the relevant sections of the QPR.

### Reporting Activities Related to ARP Act Child Care Stabilization Grants

The American Rescue Plan (ARP) Act included approximately \$24 billion for child care stabilization grants, representing an important opportunity to stabilize the child care sector and do so in a way that builds back a stronger child care system that supports the developmental and learning needs of children, meets parents' needs and preferences with equal access to high-quality child care, and supports a professionalized workforce that is fairly and appropriately compensated for the essential skilled work that they do. Lead agencies must spend stabilization funds as subgrants to qualified child care providers to support the stability of the child care sector during and after the COVID-19 public health emergency. Please refer to the information memorandum <a href="ARP Act Child Care Stabilization Grants">ARP Act Child Care Stabilization Grants</a> (CCDF-ACF-IM-2021-02) for further guidance on the child care stabilization grants made available through the ARP Act.

While the OCC has established a new data collection form, the ACF-901 – American Rescue Plan (ARP) Stabilization Grants Provider-Level Data, as the primary data collection mechanism for reporting related to ARP stabilization grants, Section 13 of the QPR asks about activities related to stabilization grants made possible through ARP funding. The OCC will inform lead agencies if the data reported through the ACF-901 is complete enough to warrant skipping Section 13 of the QPR. The following information is requested in aggregate in Section 13:

- Number of stabilization grants awarded by provider type and subsidy receipt;
- The minimum, maximum, and average provider stabilization grant award amounts and average number of awards made to the same provider;
- Average provider enrollment by provider type;
- Number of children served by providers receiving stabilization grants;
- Number of stabilization grants awarded to providers by gender, race and ethnicity, and who are operating in high need zip codes;
- If certain providers were targeted for grants and if certain types of uses of stabilization grants were prioritized;
- Supports available to providers during the application process and after receipt of stabilization grants; and
- Methods to eliminate fraud, waste, and abuse when providing stabilization grants;

Section 13 should be used to report on ARP Stabilization Grants ONLY. Other

child care sustainability or stabilization grant programs established or ongoing using other funding mechanisms (i.e., CCDF or other supplemental funding e.g., CARES, CRRSA, ARP Supplemental Discretionary Funds) should be reported in Section 11.

When is the QPR Due to ACF?

The QPR will be due to the Administration for Children and Families (ACF) by the designated lead agency no later than December 31, 2021.

#### **Glossary of Terms**

The following terms are used throughout the QPR. These definitions can also be found in section 98.2 in the CCDBG Act of 2014. For any term not defined, please use the lead agency definition of terms to complete the QPR.

Center-based child care provider means a provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a non-residential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.

Director means a person who has primary responsibility for the daily operations and management for a child care provider, which may include a family child care provider, and which may serve children from birth to kindergarten entry and children in school-age child care.

Family child care provider means one or more individuals who provide child care services for fewer than 24 hours per day per child in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)' work.

*In-home child care provider* means an individual who provides child care services in the child's own home.

License-exempt means facilities that are not required to meet the definition of a facility required to meet the CCDF section 98.2 definition of "licensing or regulatory requirements." Associated terms include "legally exempt" and "legally operating without regulation."

*Licensed* means a facility required by the state to meet the CCDF section 98.2 definition of "licensing or regulatory requirements," which explains that the facility meets "requirements necessary for a provider to legally provide child care services in a state of locality, including registration requirements established under state, local or tribal law."

Programs refer generically to all activities under the CCDF, including child care

services and other activities pursuant to §98.50 as well as quality activities pursuant to §98.43.

*Provider* means the entity providing child care services.

Staffed family child care network means a group of associated family child care providers who pool funds to share some operating costs and to pay for at least one staff person who helps the providers to manage their businesses and enhance quality.

Teacher means a lead teacher, teacher, teacher assistant or teacher aide who is employed by a child care provider for compensation on a regular basis, or a family child care provider, and whose responsibilities and activities are to organize, guide and implement activities in a group or individual basis, or to assist a teacher or lead teacher in such activities, to further the cognitive, social, emotional, and physical development of children from birth to kindergarten entry and children in school-age child care.

#### Overview

To gain an understanding of the availability of child care in the state or territory, please provide the following information on the total number of child care providers. Please enter N/A when necessary.

1.1 State or Territory Child Care Provider Population

Enter the total number of child care providers that operated in the state or territory as of September 30, 2021. These counts should include all child care providers, not just those serving children receiving CCDF subsidies. Please enter N/A when necessary.

| □ Licensed center-based programs #: 14,964                             |
|--|
| □ N/A. Describe:   |
| □ License exempt center-based programs #: 196                          |
| □ N/A. Describe:   |
| ☑ Licensed family child care #: 28,098                                 |
| □ N/A. Describe:   |
| ☑ License-exempt family child care (care in providers' home) #: 30,575 |
| □ N/A. Describe:   |
| ☐ In-home (care in the child's own home) #:                            |
| ☑ N/A. Describe: California does not collect this data.                |
| ☐ Other. Explain: N/A  |

## **Goals for Quality Improvement**

Based on Question 7.1.1 and 7.1.2 from the FFY 2019-2021 CCDF State and Territory Plan, please report progress on the lead agency's overarching goals for quality improvement during October 1, 2020 to September 30, 2021. Include any significant areas of progress that were not anticipated in the Plan as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible.

The Early Childhood Development Act of 2020 (Senate Bill (SB) 98, Chapter 24, Statutes of 2020) authorized the transfer of CCDF funded child care and development programs previously administered by the California Department of Education (CDE) to the California Department of Social Services (CDSS), effective July 1, 2021. This transfer will allow for a

more efficient way to support children and families by aligning supports and resources under one lead agency and alignment with Child Care Licensing, Alternative Pay Programs, accounting, fiscal, and other offices. As part of the focus of this transition, the CDSS is focused on quality improvements and measurements. In order to ensure this focus is a success, the CDSS and the CDE continue to work in partnership. Thus, this report will highlight the work that CDE has led and share how work is transitioning to the CDSS.

The CDSS continues to utilize the technical assistance (TA) the CDE received from the National Center on Early Childhood Quality Assurance to align CCDF investments with quality activities to maximize investments, to ensure sufficient time for new quality investments to be launched, and to achieve adequate implementation. As a result of the TA, the CDSS has started an alignment and reporting pilot process for future fiscal year quality investment activities that includes an assessment and feedback loop that includes Research, Professional Development (PD) systems support, and Data and Evaluation. This new system will create a continuous assessment and evaluation system that will (1) collect annual program quality reporting information; (2) data to identify gaps in PD accessibility, affordability, and quality, (3) identify the challenges and needs of the workforce including equity across programs, funding streams, and communities, and (4) informs the CDSS when investments are fully implemented and sustainable. This system allows for analysis of quarterly progress reports as well as end of year evaluations to inform investment and policy decisions. In addition, the CDSS completes formal assessments on specific quality investment projects and the results of the evaluations are used for project improvement including how to better support Family, Friends and Neighbor providers. To increase equitable access to high-quality child care services through CCDF quality investment funds, CDSS intends to work in partnership with state agencies, the child care community, and families to conduct ongoing evaluation of its quality improvement efforts. To support equitable access and outcomes, CDSS proposes to build from recent state planning efforts (i.e., California Early Learning and Care Master Plan, Blue-Ribbon Commission, and Preschool Development Grant-Renewal). These planning efforts will inform future decisions to change CCDF funded systems, policies, and practices that produce inequitable access and outcomes. CDSS will continue to explore additional strategies to maximize investments for quality improvement investments at the state and local level, and in partnership with other state agencies

In 2020, the CDE conducted an evaluation of the Child Development Training Consortium using information compiled from program records, interviews, focus group interviews and surveys to evaluate the implementation and impact of the program. The findings will be used to identify the impact of the programs on the student's success and ways to minimize barriers to participation. Currently, the CDE is completing an evaluation of the California Early Childhood Mentor Program (CECMP). The evaluation study seeks to describe how the CECMP project has been implemented, identify promising practices and obtain stakeholder feedback about CECMP implementation and future early childhood mentoring priorities in California. The evaluation study is contracted to be completed by March 2022. The results of these two evaluations will be incorporated into the continuous assessment and evaluation

system to inform current and future contract needs for state-wide quality investments.

## 2. Supporting the training and professional development of the child careworkforce

Goal: Ensure the lead agency's professional development systems or framework provides initialand ongoing professional development and education that result in a diverse and stable child care workforce with the competencies and skills to support all domains of child development.

Please select N/A as appropriate.

### 2.1 Lead Agency Progression of Professional Development

- 2.1.1 Did the lead agency use a workforce registry or professional development registry to track progression of professional development during October 1, 2020 to September 30, 2021?
  - ☑Yes. If yes, describe. California collaborates with a quasi-government funded workforce registry to compile, evaluate and track participant training data to support the current Quality Counts California (QCC) System as well as additional professional development investments as determined by the California Department of Social Services (CDSS). Participants receiving supports via QCC are required to create and maintain a workforce registry profile. This profile includes an evaluation of professional development (PD) and a place to conveniently store data for the participants. There are a variety of modalities in which training providers offer PD to meet the needs of the workforce. Various modalities include, but are not limited, to virtual learning platforms, live video, asynchronous and in-person formats. The workforce registry also offers a calendar for training agencies to add PD opportunities and for participants to find and sign up for these PD opportunities. The utilization of the workforce registry is not consistent throughout the state or throughout the various quality investments supporting PD opportunities due to various barriers.
  - □ No. If no, what alternative does the lead agency use to track the progression of professional development for teachers/providers serving children who receive CCDFsubsidy? Describe. N/A
- 2.1.2 Are any teachers/providers required to participate?
  - ☑Yes. If yes, describe. Participants receiving QCC supports are required to create and maintain a workforce registry profile to track their professional development progress. This gives insight into what types of PD opportunities participants are seeking and allows California to understand the specific needs of our diverse workforce. Child care and development participants not receiving QCC supports are encouraged to participate in PD opportunities funded by the CCDF and participate in the workforce registry.

|  |  | No. | If no, | describe. | N/A |
|--|--|-----|--------|-----------|-----|
|--|--|-----|--------|-----------|-----|

2.1.3 Total number of participants in the registry as of September 30, 2021. 116,261

| 2.2 What supports did the lead agency make available to teachers/providers to |
|---|
| help them progress in their education and professional development and        |
| career pathway between October 1, 2020 and September 30, 2021 (check all      |
| that apply)?  |
| ☐ Scholarships (for formal education institutions)                            |

| □ Scholarships (for formal education institutions)   |
|--|
| ☐ Financial bonus/wage supplements tied to education levels  |
| ☐ Career advisors, mentors, coaches, or consultants  |
| □ Reimbursement for training   |
| □ Loans □ Substitutes, sick/annual leave, release time, etc. for professional development  |
| ☑ Other. Describe. A total of 7,155 participants in various activities supported by the  |
| Workforce Development Grant received a total of \$6,574,996.37 as direct stipends/incentives or Non-direct financial incentives. |

Direct stipends/incentives may include these types of supports:

- Moving up on the California ECE Career Lattice (degree attainment, acquisition of a child development permit, General Educational Development [GED] attainment, etc.)
- Completion of coursework on a degree pathway
- Becoming licensed
- Costs associated with completing trainings or coursework (childcare costs, transportation, costs of textbooks, tuition etc.)
- Participation in/completion of apprenticeship programs or cohort models
- Completing trainings/ECE coursework specific to local needs
- Financial aid, scholarships, and/or financial support for costs associated with unit-based classes (tuition, fees, books, etc.)
- Payment of costs/fees associated with registering for a Child Development Permit or California Department of Social Services (CDSS) Childcare License.

Non- direct financial incentives include:

- Supports that facilitate access to trainings and credit-bearing classes that help participants acquire necessary skills to obtain a Child Development Permit, Degree, CDSS childcare license, or move along the Career Lattice according to their professional development plan, such as translators for bilingual classes and trainings, provision of childcare during trainings, etc.
- Funding professional development/training opportunities linked to required workforce pathways, and optional workforce pathways as applicable
- Program infrastructure related to cohort models or apprenticeships

- Costs associated with co-locating classes/trainings in convenient locations, holding classes/trainings in community-based settings, and/or convening classes/trainings at convenient times for working students (e.g., evenings and weekends)
- Substitutes
- Supports for English language learners, such as linked classes (English as a Second Language with Child Development), curriculum and texts in languages other than English, and other multilingual educational and career support including tutoring, homework assistance, translation, etc.
- Laptops or computers on loan to members of the workforce participating in cohorts, apprenticeship models, or other specialized higher education activities
- □ N/A. Describe.

For questions 2.3 to 2.4 please report on the number of staff by qualification level as of September 30, 2021. Count only the highest level attained by staff. If N/A describe.

#### 2.3 Licensed child care providers

- A. Total Number:
  - a. Licensed child care center directors: 96
  - b. Licensed child care center teachers: 1,694
  - c. Licensed family child care center providers: 294
- B. How many had a Child Development Associate (CDA)?
  - a. Licensed child care center directors: N/A
  - b. Licensed child care center teachers: N/A
  - c. Licensed family child care center providers: N/A.

California does not offer or require the Child Development Associate (CDA) credential. For programs in California's direct-contract subsidized system, staff are required to obtain and maintain a Child Development Permit. Dependent on the permit level, specific requirements for early childhood education and general education college units as well as continuing education/PD opportunities to obtain and maintain their specific permit level. Some individuals do hold the CDA as a requirement of their current or past employer. These CDA credentials are tracked in the workforce registry only when the individual self-reports it.

- C. How many had an Associate's degree in an early childhood education field (e.g., psychology, human development, education)?
  - a. Licensed child care center directors: 25
  - b. Licensed child care center teachers: 475
  - c. Licensed family child care center providers: 92
- D. How many had a Bachelor's degree in an early childhood education field (e.g.,

psychology, human development, education)?

- a. Licensed child care center directors: 19
- b. Licensed child care center teachers: 261
- c. Licensed family child care center providers: 27
- E. How many had a State child care credential?
  - a. Licensed child care center directors: 52
  - b. Licensed child care center teachers: 958
  - c. Licensed family child care center providers: 175
- F. How many had State infant and toddler credentials?
  - a. Licensed child care center directors: N/A
  - b. Licensed child care center teachers: N/A
  - c. Licensed family child care center providers: N/A

California does not offer an Infant/Toddler permit or credential.

- G. How many had an "other degree"
  - a. Licensed child care center directors: N/A
  - b. Licensed child care center teachers: N/A
  - c. Licensed family child care center providers: N/A

Individuals who have degrees in subjects other than early childhood education field can obtain a Child Development Permit to meet the staffing requirements to work in a child care setting.

### 2.4 Licensed CCDF providers

- A. Total Number:
  - a. Licensed child care center directors: 0
  - b. Licensed child care center teachers: 0
  - c. Licensed family child care center providers: 0

California does not collect data in the workforce registry specific to CCDF versus non-CCDF funded programs.

- B. How many had a Child Development Associate (CDA)?
  - a. Licensed child care center directors: 0
  - b. Licensed child care center teachers: 0
  - c. Licensed family child care center providers: 0

California does not collect data in the workforce registry specific to CCDF versus non-CCDF funded programs.

- C. How many had an Associate's degree in an early childhood education field (e.g., psychology, human development, education)?
  - a. Licensed child care center directors: 0
  - b. Licensed child care center teachers: 0
  - c. Licensed family child care center providers: 0

California does not collect data in the workforce registry specific to CCDF versus non-CCDF funded programs.

- D. How many had a Bachelor's degree in an early childhood education field (e.g., psychology, human development, education)?
  - a. Licensed child care center directors: 0
  - b. Licensed child care center teachers: 0
  - c. Licensed family child care center providers: 0

California does not collect data in the workforce registry specific to CCDF versus non-CCDF funded programs.

- E. How many had a State child care credential?
  - a. Licensed child care center directors: 0
  - b. Licensed child care center teachers: 0
  - c. Licensed family child care center providers: 0

California does not collect data in the workforce registry specific to CCDF versus non-CCDF funded programs.

- F. How many had State infant and toddler credentials?
  - a. Licensed child care center directors: 0
  - b. Licensed child care center teachers: 0
  - c. Licensed family child care center providers: 0

California does not collect data in the workforce registry specific to CCDF versus non-CCDF funded programs.

- G. How many had an "other degree"
  - a. Licensed child care center directors: 0
  - b. Licensed child care center teachers: 0
  - c. Licensed family child care center providers: 0

California does not collect data in the workforce registry specific to CCDF versus non-CCDF funded programs.

## 2.5 How many providers received the following additional forms of professional development from October 1, 2020 to September 30, 2021?

#### A. Business Practices

- a. Total: 1,698
- b. Licensed or registered center-based programs: 959
- c. License-exempt center-based programs: 0
- d. Licensed or registered family child care: 443
- e. License-exempt family child care (care in provider's home): 35
- f. In-home care (in the child's own home): 0

#### B. Mental Health

- a. Total: 8.012
- b. Licensed or registered center-based programs: 2,010
- c. License-exempt center-based programs: 0
- d. Licensed or registered family child care: 172
- e. License-exempt family child care (care in provider's home): 22
- f. In-home care (in the child's own home): 0

### C. Diversity, Equity and Inclusion

- a. Total: 30,969
- b. Licensed or registered center-based programs: 4,880
- c. License-exempt center-based programs: 0
- d. Licensed or registered family child care: 777
- e. License-exempt family child care (care in provider's home): 48
- f. In-home care (in the child's own home): 0

#### D. Other: Dual language learning and DLL Modules

- a. Total: 7,378
- b. Licensed or registered center-based programs: 3,670
- c. License-exempt center-based programs: 0
- d. Licensed or registered family child care: 227
- e. License-exempt family child care (care in provider's home): 34
- f. In-home care (in the child's own home): 0

**NOTE:** Totals are higher than total of category/provider type due to the fact that in the California database, data includes an identifier as "other" as the training is available to more than "providers". This data is not currently collected for the license-exempt center-based programs and in-home (care in the child's own home).

## 2.6 Spending:

2.6.1 Did the lead agency spend funds from any of the following sources to support the <u>training and professional development</u> of the child care workforce during October 1,2020 to September 30, 2021?

| A. | CCDF quality set aside (from all available appropriation years that were spent during the fiscal year)?  ☑ Yes. Amount spent: \$53,423,975  Comments related to dollar amount provided (optional):  ☐ No  ☐ N/A Describe:   |
|----|---|
| B. | Non-CCDF funds (e.g., TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.)?  ☑ Yes. Amount spent: \$1,686,000.20  If yes, describe source(s) of funding. California spent a total of \$1,686,001 in state general funds.  ☐ No  |
| C. | <ul> <li>□ N/A Describe:</li> <li>Coronavirus Aid, Relief, and Economic Security (CARES)Act, 2020 funds?</li> <li>□ Yes. Amount spent</li> <li>If yes, describe how funds were used.</li> <li>☑ No</li> <li>□ N/A Describe:</li> </ul>  |
| D. | Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act, 2021?  □ Yes. Amount spent If yes, describe how funds were used.  □ No □ N/A Describe:   |
| E. | American Rescue Plan (ARP)Act, 2021 Supplemental funding?  Yes. Amount spent  If yes, describe how funds were used.  No  N/A Describe:  |
| F. | ARP Act, 2021 StabilizationGrant set-aside ONLY. (As a reminder 10% of the ARP Stabilization Grants could be set-aside for administrative expenses, supply building, and technical assistance. This question refers only to this 10%.   ☐ Yes. Amount spent: \$6,950,000  If yes, describe how funds were used. |

| Investments in California Resource & Referral Agencies, expansion of the |
|--|
| California Child Care Initiative Project, and Infant and Early Childhood |
| Mental Health.   |
| □ No   |
| □ N/A Describe.  |

## 2.7 Progress Update: Describe the measures used and progress made during October 1,2020 to September 30, 2021. Include examples and numeric targets where possible.

The CDSS continues to support the workforce in the progression of PD by investing in professional development systems that provide opportunities and resources for participants working with children ages birth through age twelve. Quality improvement activities funded through these investments utilize quantitative and qualitative data to measure progress made, identify gaps in services, and inform current and future investments. Specific measures also include data to monitor progress along the career lattice and continuing education/professional development hours.

In December 2020, the "Master Plan for Early Learning and Care (MPELC): California for All Kids" was released and builds a roadmap based on research to support building a system that is focused on comprehensive and equitable early learning and care (ELC) systems. The plan will support the better understanding of children, families and the providers that California serves. With recent emphasis on equity, there were several trainings on implicit bias, and the QCC consortia participated in a year-long equity series designed to unpack and acknowledge barriers in access to resources within the QCC system.

Additionally, California offered a two series training titled "Brave Spaces". This series allowed participants to hear about inequities that many of our Black, Indigenous and People of Color have experienced in the current ELC system. The series is a start, builds on the recommendations from MPELC, and is intended to be an introduction into more PD opportunities that CDSS will develop to support an anti-racist and anti-biased child care system.

Individual workforce participants receive incentives for participating in the QCC Workforce Pathways grant. This grant is available to all child care providers working directly in settings that serve children receiving state subsidized child care. The grant expands resources to Family Child Care Home providers, Family, Friend and Neighbor providers and the Tribal Child Care Association of California. A total of 49 grantees applied for workforce funding to support the workforce at the local level via the QCC workforce grant. Grantees are required to develop an annual workforce plan based on data available and the specific needs of their local workforce. Local workforce plans allow for a more diverse ELC system, a way to incentive and stabilize the workforce and strengthen competencies and skills to support the unique needs of California's children and families.

In State Fiscal Year 2021-22 the CDSS implemented a statewide expansion of the QCC

Coaching Companion. The Coaching Companion creates sustainable virtual coaching option where teachers can see themselves in practice and engage in thoughtful self-reflection with their coach. The purpose of this project is to provide Coaching Companion access, training and support for up to 300 additional QCC coaches across California in 26 counties. In addition, project leaders meet with Tribal Child Care Association of California (TCCAC) leaders to assess direct coaching needs in tribal communities in California. The TCCAC expressed interest and will include Coaching Companion cycles as one of the pathways they are creating for teachers.

The Early Childhood Development Act of 2020 (Senate Bill (SB) 98, Chapter 24, Statutes of 2020) authorized the transfer of child care and development programs previously administered by the CDE to the CDSS, effective July 1, 2021. Due to this, CCDF funded programs transferred from CDE to CDSS to align supports and resources under one lead agency, for a more efficient way to support children and families. This transfer allows quality programs to work closely and in alignment with Child Care Licensing, Alternative Pay Programs, accounting, fiscal, and other offices. This is progress, and one of the recommendations from the MPELC.

### 3. Improving early learning and development guidelines

□ N/A Describe:

Goal: To ensure the lead agency has research-based early learning and development guidelinesappropriate for children birth to age 12, including children with special needs and dual language learners that are used to inform practice and professional development.

3.1 Ware any changes or undates made to the State or Territory's early learning and

| development guidelines during October 1, 2020 to September 30, 2021?   |
|--|
| ☐ Yes. If yes, describe changes or updates:  |
| ⊠ No   |
| □ N/A Describe:  |
| 3.2 Spending:  |
| Did the lead agency spend funds from any of the following sources on the <u>development of implementation of early learning and development guidelines</u> during October 1, 2020 to September 30, 2021? |
| A. CCDF quality set aside (from all available appropriation years that were spent<br>during the fiscal year)?  |
| ✓ Yes. Amount spent: \$4,131,059   |
| Comments related to dollar amount provided (optional):   |
| □ No   |
|  |

B. Non-CCDF funds (e.g., TANF funds spent directly on quality, Preschool

|    | Development Funds, state or local funds, etc.)?   |
|----|---|
|    | ☐ Yes. Amount spent   |
|    | If yes, describe source(s) of funding.  |
|    | ⊠ No  |
|    | □ N/A Describe:   |
| C. | Coronavirus Aid, Relief, and Economic Security (CARES)Act, 2020 funds?  |
|    | ☐ Yes. Amount spent   |
|    | If yes, describe how funds were used.   |
|    | ⊠ No  |
|    | □ N/A Describe:   |
| D. | Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act, 2021?  |
|    | ☐ Yes. Amount spent   |
|    | If yes, describe how funds were used.   |
|    | X No  |
|    | □ N/A Describe:   |
| E. | American Rescue Plan (ARP)Act, 2021 Supplemental funding?   |
|    | ☐ Yes. Amount spent   |
|    | If yes, describe how funds were used.   |
|    | ⊠ No  |
|    | □ N/A Describe:   |
| F. | ARP Act, 2021 StabilizationGrant set-aside ONLY. (As a reminder 10% of the ARP Stabilization Grants could be set-aside for administrative expenses, supply building, and technical assistance. This question refers only to this 10%. |
|    | ⊠ No  |
|    | □ N/A Describe:   |
|    |   |

## 3.3 Progress Update: Describe the measures used and progress made during October 1,2020 to September 30, 2021. Include examples and numeric targets where possible.

In Federal Fiscal Year 2020, 15,368 individuals completed professional development (PD) opportunities related to the early learning and development guidelines (Early Learning and Development Foundations and Frameworks) on the California Early Childhood Online system. In addition, the California Preschool Instructional Network provided the following activities: 1,054 participants completed PD opportunities specific to inclusion and children with special needs, with a focus on inclusive quality child care settings and promoting inclusive practices; 1,764 participants completed PD opportunities specific to dual language learners with a focus on English development, bilingualism and best practices.

## 4. Developing, implementing, or enhancing a quality rating and improvement system (QRIS) and other transparent system of quality indicator

Goal: To ensure the lead agency implements a quality rating and improvement system, or otherquality rating system, to promote high-quality early care and education programs.

Please provide the lead agency's definition of high quality care, and how it relates to the tiers of the QRIS, including a description of all tiers and which are considered high quality(if applicable). This may include the high quality definition as part of the lead agency's Quality Rating and Improvement System (QRIS). If no QRIS exists describe other measures used to assess quality (may include assessment scores, accreditation, or other metric):

California's Quality Rating and Improvement System (QRIS) has been branded Quality Counts California (QCC). The goal of QCC is to ensure that children and families in California have access to high quality programs so that they thrive in their early learning and care (ELC) settings and succeed in kindergarten and beyond. The QCC helps families identify providers who demonstrate a commitment to quality and provide ELC experiences that meet the diverse needs of California families. Parent education for choosing the right quality early learning and care environment is critical as these experiences build the foundation for skills California's children need in school, work, and life.

The QCC definition of quality states: "Quality early learning and care means learning environments, relationships, interactions, and activities support all children's growth and development to prepare them for success in school and life."

Per the quality elements related to the QCC system, California's rating matrix strives to address the following through rating and quality improvement:

- The program and staff involve families to enrich children's learning experiences.
- Teachers have individual time with children.
- Teachers have professional development and growth opportunities.
- Program evaluations are conducted for making data-driven decisions for ongoing improvement.
- Developmental monitoring/screening is conducted inclusive of families and includes follow-up referrals.
- Activities are driven by children's needs and interests.

The QCC Consortiums strive to improve the quality of early learning with a focus in three core areas of program quality: (1) Child Development and School Readiness; (2) Teachers and Teaching; and (3) Program and Environment – administration and Leadership. Consortium members voluntarily agreed to align their local rating matrix to a common

"Quality Continuum Framework" that included a common rating matrix with local modifications allowed at Tiers 2 and 5 to meet local needs. All consortia agreed to implement identified tools, measures, and documents to fidelity; adhering to the tools' authors' original approaches. Preserving the components that made the original practice effective can directly impact the success of desired outcomes. One recommended way to ensure high quality implementation is for consortia to identify and clearly stipulate four distinct functions: 1) Raters review and validate portfolio documentation,2) External Assessors are trained on the Environment Rating Scales (ERS) and/or Classroom Assessment Scoring System® (CLASS®) tool carry out the assessment portion of the rating, 3) Monitors ensure sites maintain their rated quality and compliance with Implementation Guide, and 4) Technical Assistance (TA) providers/coaches support the creation and/or implementation of a site's Quality Improvement Plan.

California is currently evaluating the QCC system as a whole to ensure equity and access for all children, families and the workforce. A series of discussions were recently held to evaluate the effectiveness of the current system and acknowledging unintended barriers that may prevent equitable access for all whom seek to participate and receive resources. This work is ongoing and will continue to be a focus as California moves forward to ensure equity in the ELC system for all children and families.

## 4.1 Indicate the status of the lead agency's quality rating and improvement system(QRIS) during October 1, 2020 to September 30, 2021?

| ☐ The lead agency QRIS is operating state- or territory-wide.   |
|---|
| ☐ The lead agency QRIS is operating a pilot (e.g., in a few localities, or only a few                                     |
| levels) but not fully operating state- or territory-wide.   |
| $\square$ The lead agency is operating another system of quality improvement.   |
| Describe this system:   |
| $\Box$ The lead agency does not have a QRIS or other system of quality improvement.                                       |
| 4.2 What types of providers participated in the QRIS during October 1, 2020 to September 30, 2021 (check all that apply)? |
| □ Licensed child care centers   |
| □ Licensed family child care homes  |
| □ License-exempt providers  |
| ☑ Programs serving children who receive CCDF subsidy  |
| □ Early Head Start programs   |
|   |
| State Prekindergarten or preschool programs   |
| <ul> <li>Local district-supported Prekindergarten programs</li> </ul>   |
| ☑ Programs serving infants and toddlers   |
| ☑ Programs serving school-age children  |

|     | O (1  | _     |        |
|-----|-------|-------|--------|
| 1 1 | Other | . Des | crine: |

## 4.3 For each setting, indicate the number of providers eligible to participate in the QRIS and the number of providers participating in the QRIS as of September 30, 2021?

- A. Number of Providers eligible for QRIS.
  - g. Licensed child care centers: 14,641.
  - h. License-exempt child care centers: 196.
  - i. Licensed family child care homes: 26,108.
  - j. License-exempt family child care homes: 20,110.
  - k. In-home care (in the child's own home): 235.
  - I. Programs serving children who receive CCDF subsidy: 38,667.
  - m. Other, Describe: N/A.
- B. Number of providers participating in QRIS.
  - a. Licensed child care centers 4,078.
  - b. License-exempt child care centers 60.
  - c. Licensed family child care homes 3,159.
  - d. License-exempt family child care homes 733.
  - e. In-home care (in the child's own home) 0.
  - f. Programs serving children who receive CCDF subsidy 1,466.
  - g. Other, Describe: N/A

#### C. N/A

- a. Licensed child care centers 0.
- b. License-exempt child care centers 0.
- c. Licensed family child care homes 0.
- d. License-exempt family child care homes 0.
- e. In-home care (in the child's own home) 0.
- f. Programs serving children who receive CCDF subsidy 0.
- g. Other, 0 Describe: N/A.

### 4.4 Is participation in the QRIS mandatory for any group of providers?

| ☐ Yes (check all that apply).                        |
|--|
| ☐ Licensed child care centers                        |
| ☐ Licensed family child care homes                   |
| ☐ License-exempt providers                           |
| ☐ Programs serving children who receive CCDF subsidy |
| ☐ Early Head Start programs                          |
| ☐ Head Start programs                                |
| ☐ State Prekindergarten or preschool programs        |
| ☐ Local district-supported Prekindergarten programs  |

|                         | ☐ Programs serving infants and toddlers   |
|-------------------------|---|
|                         | ☐ Programs serving school-age children  |
|                         | ☐ Faith-based settings  |
|                         | ☐ Tribally operated programs  |
|                         | ☐ Other. Describe:  |
|                         | No.   |
|                         | ☐ N/A Describe  |
| _                       |   |
|                         | e number of programs that met the lead agency's high quality definition mber 30, 2021.  |
| a) Lio                  | censed child care centers #: 4,078  |
| b) Lio                  | cense-exempt child care centers #: 60   |
| ,                       | censed family child care homes #: 3,159   |
| d) Lie                  | cense-exempt family child care (care in providers' home) #: 9   |
| e) In-                  | home (care in the child's own home) #: 0  |
| f) Pr                   | ograms serving children who receive CCDF subsidy #: 1,446   |
| □ N/A                   | A. Describe   |
| 4.6 Enter the September | e number of CCDF children in high quality care by age grouping as of 30, 2021:  |
| a. Total                | number of CCDF children in high quality care #: 26,612  |
| i.                      | Infant #: 2,804   |
|                         | Define age range: 0 through 17 months old.  |
| ii.                     | Toddler #: 7,433  |
|                         | Define age range: 18 through 35 months old.   |
| iii.                    | Preschool #: 5,151  |
|                         | Define age range: 36 through 59 months old.   |
| iv.                     | School-age #: 11,224  |
|                         | Define age range: 60+ months old.   |
| b. 🗆 Ot                 | her. Describe:  |
| c. □ N/                 | A. Describe:  |
| (or related t           | lead agency provide one-time grants, awards or bonuses connected to o) QRIS during October 1, 2020 to September 30, 2021? If yes, how many led to the following types of programs during October 1, 2020 to 30, 2021? |
| ☐ Yes,                  | the following programs received grants.   |
|                         | Licensed child care centers #   |
| b.                      | License-exempt child care centers #   |
| C.                      | Licensed family child care homes #  |

| a. Lice                             | ense-exempt family child care (care in providers' nome) #  |
|-------------------------------------|--|
| e. In-h                             | ome (care in the child's own home) #   |
| f. Pro                              | grams serving children who receive CCDF subsidy #  |
| □ No.                               |  |
| time grants, a                      | cribe: California utilizes CCDF quality investment funds to provide one-<br>twards or bonuses at the regional and/or local QCC level. However, at<br>ewide data is not collected by provider type.   |
| (or related to) QR programs receive | gency provide on-going or periodic quality stipends connected to IS during October 1, 2020 to September 30, 2021? If yes, how many ed on-going or periodic quality stipends connected to (or related to) ober 1, 2020 to September 30, 2021? |
| $\square$ Yes, the f                | ollowing programs received stipends.   |
| a. Lice                             | ensed child care centers #:  |
| b. Lice                             | ense-exempt child care centers #:  |
| c. Lice                             | ensed family child care homes #:   |
| d. Lice                             | ense-exempt family child care (care in providers' home) #"   |
| e. In-h                             | ome (care in the child's own home) #:  |
| f. Pro                              | grams serving children who receive CCDF subsidy #:   |
| □ No.                               |  |
| ⊠ N/A. Desc                         | cribe: California utilizes CCDF quality investment funds to provide on-  |
| going or perio                      | odic quality stipends at the regional and/or local QCC level. However, at ewide data is not collected by provider type.  |
| other quality rati                  | agency provide ongoing technical assistance related to the QRIS or ing system during October 1, 2020 to September 30, 2021? If so, how received ongoing technical assistance during October 1, 2020 to 021?                                  |
|                                     | following programs received ongoing technical assistance.  |
|                                     | a. Licensed child care centers #: 4,078  |
|                                     | o. License-exempt child care centers #: 60   |
| (                                   | c. Licensed family child care homes #: 3,159   |
|                                     | d. License-exempt family child care (care in providers' home) #: 733   |
|                                     | e. In-home (care in the child's own home) #: 9   |
|                                     | f. Programs serving children who receive CCDF subsidy #: 1,446   |
| □ No.                               |  |
| □ N/A. Des                          | scribe:  |
| quality rating sy                   | I agency provide higher subsidy rates related to the QRIS or other stem during October 1, 2020 to September 30, 2021? If so, how received higher subsidy payment rates due to their QRIS rating  |

| during October 1, 2020 to September 30, 2021?   |
|---|
| ☐ Yes, the following programs received higher subsidy rates.  |
| a. Licensed child care centers #  |
| b. License-exempt child care centers #  |
| c. Licensed family child care homes #   |
| d. License-exempt family child care (care in providers' home) #   |
| e. In-home (care in the child's own home) #   |
| f. Programs serving children who receive CCDF subsidy #   |
| ⊠ No.   |
| □ N/A. Describe:  |
| 4.11 Spending:  |
|   |
| 4.11.1 Did the lead agency spend funds from any of the following sources to support<br>QRIS or other quality rating systems during October 1, 2020 to September 30<br>2021? |
| A. CCDF quality set aside (from all available appropriation years that were spent   |
| during the fiscal year)?  |
|   |
| Comments related to dollar amount provided (optional):  |
| □ No  |
| □ N/A Describe:   |
| B. Non-CCDF funds (e.g., TANF funds spent directly on quality, Preschool  |
| Development Funds, state or local funds, etc.)?   |
| ☐ Yes. Amount spent.  |
| If yes, describe source(s) of funding.  |
| ⊠ No  |
| □ N/A Describe:   |
| C. Coronavirus Aid, Relief, and Economic Security (CARES) Act, 2020 funds?  |
| ☐ Yes. Amount spent.  |
| If yes, describe how funds were used.   |
| ⊠ No  |
| □ N/A Describe:   |
| D. Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act,   |
| 2021?   |
| ☐ Yes. Amount spent.  |
| If yes, describe how funds were used.   |
| ⊠ No  |
| □ N/A Describe:   |
| E. American Rescue Plan (ARP) Act, 2021 Supplemental funding?   |

|    | ☐ Yes. Amount spent.  |
|----|---|
|    | If yes, describe how funds were used.   |
|    | ⊠ No  |
|    | □ N/A Describe:   |
| F. | ARP Act, 2021 StabilizationGrant set-aside ONLY. (As a reminder 10% of the      |
|    | ARP Stabilization Grants could be set-aside for administrative expenses, supply |
|    | building, and technical assistance. This question refers only to this 10%.      |
|    | ☐ Yes. Amount spent.  |
|    | If yes, describe how funds were used.   |
|    | ⊠ No  |
|    | □ N/A Describe:   |

## 4.12 Progress Update: Describe the measures used and progress made during October 1, 2020, to September 30, 2021. Include examples and numeric targets where possible.

The QCC, California's QRIS, endured challenges this past year with the outcry against systemic racism, the ongoing COVID-19 pandemic challenges and the transfer of child development programs from the California Department of Education (CDE) to the CDSS. In the summer of 2020, the nation was devastated and outraged by the murder of George Floyd calling out police brutality, spurring call to actions to address all systemic racism. The call to action also included addressing racial inequities that have impacted California's QCC system. Specific issues that have been raised include equity issues with pay, access to the system and the rating matrix itself. Through the course of the year and ongoing equity conversations, California will continue to build upon the current ELC system to create a whole child-centered system driven by inclusion and governed by equity. This will continue to be part of California's ongoing and evolving work.

In May 2021, a QCC Equity Work and Implementation Plan was developed by the leading state agencies and from the feedback of QCC Consortium. The goal of the state level plan is to create a unified structure to facilitate coordination, integration, and the exchange of information by clarifying roles for each state entity involved in these efforts. Funding from the Preschool Development Grant – Renewal are targeted to redesign the state's quality assurance protocols and implement a multiyear competitive process to ensure accountability and opportunities for continuous improvement. Efforts to streamline the state's quality infrastructure and investments, including QCC, and adopt best practices to focus on elements of quality that affect child outcomes are underway. At the local level, California has seen a profound willingness and ability to dig in and identify key issues to address systemic inequities that persist in the ELC system. Over three quarters of California reported that their consortium or region is working to address: ability and inclusion; access to quality improvement support, dual/multi language learner and language bias, implicit bias and racism and race/ethnicity bias. Additionally, goals for change at the local level are ambitious and seek to further advance equity in policy and systems as the state begins to recover and open again.

Through this past year, providers continued to endure the challenges that come with the COVID -19 pandemic. Despite these challenges, 94 percent of sites in QCC were able to remain open and serve children and their families. An encouraging metric as CDSS licensing reported in January 2021, 8,330 licensed sites, or 11 percent of licensed programs statewide were closed due to the COVID-19 pandemic. Ninety-two percent of the consortium also stated that QCC participation and support was an important factor in keeping sites open.

Despite the challenges of the COVID-19 pandemic over the past year, the QCC saw an increase of 10 percent in statewide participating sites which served nearly 350,000 children. While half were served in centers, a remarkable 44 percent of children served were reported to be served in alternative sites such as libraries, home visiting programs, Family Resource Centers and community-based organizations. This growth in alternative sites participating is exciting as in the past three years, the number of Family Resource Centers has doubled and the number of libraries tripled. During this time, the QCC shifted their efforts to meet the needs of families, often outside the traditional care settings, and provided supports to the communities surrounding health and safety, trauma, grief, mental health, family engagement and self-care.

With the focus on access for the full continuum of care – Family, Friend and Neighbor providers to licensed centers, the QCC now has many providers participating in a "Quality Improvement System" (QIS) as opposed to the full QRIS, as for many, a full rating may not be applicable. As a result of the ongoing COVID-19 pandemic, ratings were postponed but will gradually continue now that California has reopened. Sites are encouraged to continue to hold existing ratings as well as continue to leverage the site/provider quality improvement plan as a guide for tracking quality efforts. California anxiously anticipates the day that ratings can resume safely for all participants and know that the system will evolve based on the needs of the children, families and workforce served.

This past year also saw a change in governance for the QCC system due to the Early Childhood Development Act of 2020 (Senate Bill (SB) 98, Chapter 24, Statutes of 2020) which authorized the transfer of child care and development programs previously administered by the CDE to the CDSS, effective July 1, 2021. Previously noted as a partnering agency the CDSS has now become part of the tri-agency effort funding QCC efforts.

## 5. Improving the supply and quality of child care programs for infants and toddlers

Goal: Ensure adequate and stable supply of high quality child care with a qualified, skilledworkforce to promote the healthy development of infants and toddlers. Please report on allactivities funded by quality dollars and infant toddler set-aside.

5.1 Provide the total number of state or territory-funded infant toddler specialists available to providers during October 1, 2020 to September 30, 2021.

| <ul> <li>a. Number of specialists available to all providers # 46</li> </ul>   |
|--|
| <ul><li>b. Number of specialists available to providers serving children who receive CCDF<br/># 46</li></ul>   |
| <ul> <li>Number of specialists available specifically trained to support family child care<br/>providers # 46</li> </ul>   |
| d. Number of providers served # 1,328  |
| e. Total number of children reached # 5,312  |
| $\square$ No, there are no funded specialists.   |
| □ N/A. Describe:   |
| 5.2 Please provide the total number of programs receiving state or territory-funded on-sitecoaching in infant and toddler practice and the percentage of these programs that served CCDF children. |
| A. Number of programs receiving on-site coaching:  |
| a. Licensed child care centers: # 127  |
| b. License-exempt child care centers: # 0  |
| c. Licensed family child care homes: # 356   |
| d. License-exempt family child care homes: # 26  |
| e. In-home(care in the child's own home): # 0  |
| B. Percentage of total programs receiving on-site coaching that served children who receive CCDF:  |
| a. Licensed child care centers: %  |
| b. License-exempt child care centers: %.   |
| c. Licensed family child care homes: %   |
| d. License-exempt family child care homes: %.  |
| e. In-home(care in the child's own home): %  |
| <b>NOTE:</b> California does not collect this data specific to CCDF versus non-CCDF funded programs.   |
| C. N/A:  |
| a. Licensed child care centers: # 0  |
| b. License-exempt child care centers: # 0  |
| c. Licensed family child care homes: # 0   |
| d. License-exempt family child care homes: # 0   |
| e. In-home(care in the child's own home): # 0  |
| 5.3 Provide the total number of state or territory funded infant and toddler health consultants in the state or territory during October 1, 2020 to September 30, 2021.                            |
| ☐ Consultants available #  |
|  |

| ☐ Consultants available to providers serving CCDF children #  |
|---|
| ☐ No funded infant and toddler health consultants.  |
| N/A. Describe: California does not utilize infant and toddler health consultants in our programs. However, consultation and technical support for infant and early childhood mental health is provided to early learning and care (ELC) programs (including Family Child Care Home (FCCH) providers and Family, Friend, and Neighbor (FFN) providers) through the Infant and Early Childhood Mental Health Consultation (IECMHC) program, formally the California Inclusion and Behavior Consultation Network (CIBC). The IECMHC build's capacity of program staff through a network of experienced local consultants who utilizes their knowledge of relationship-based practices and community resource to support infant and early |
| childhood mental health.  |

## 5.4 Did the lead agency conduct an analysis of supply and demand for infant toddler slots to identify areas of focus to build supply during October 1, 2020 to September 30, 2021?

Yes. Describe (include link to analysis if available): The 2019 Child Care Portfolio Data, conducted by the California Child Care Resource & Referral Network (CCCR&RN) shows a decrease of four percent in the child supply for infants and toddlers over a two-year period. This report includes licensed child care center providers and licensed FCCH providers. The report provides a portrait of child care supply, demand and cost both statewide and county by county. In State Fiscal Year (SFY) 2020-21 there were 89,853 requests for infant care (under 2 years old) reported by local Resource and Referral (R&R) agencies. Additionally, the Local Planning Councils (LPCs) collect zip code data to analyze the demand and unmet needs at the local levels. This data is used to inform subsidized funding (<a href="https://rrnetwork.org/research/child\_care\_portfolio">https://rrnetwork.org/research/child\_care\_portfolio</a>).

□ N/A. Describe:

5.5 Provide the number of staffed family child care networks supported by CCDF funds through direct agreement with a centralized hub or community-based agency during October 1, 2020 to September 30, 2021.

Number of staffed family child care networks: # 67

Describe what the hub provides to participating family child care providers: The Hubs provide the following to participating FCCH providers:

- Recruitment, enrollment, and certification of families to help ensure full enrollment;
- Recruitment, training, support and reimbursement of family child care providers;
- Collection of family fees;
- Assessment of standards set by the California Department of Education;
- Assure that the Desired Results Developmental Profile (2015) is completed

| <ul> <li>and used for the implementation of developmentally appropriate activities and learning opportunities;</li> <li>Monitoring of quality standards; and</li> <li>Ensure that basic health, safety, and nutrition requirement are met.</li> <li>No staffed family child care networks supported by CCDF funds.</li> <li>N/A. Describe:</li> </ul> |
|---|
| Spending  |
| 5.6.1 <u>Did the lead agency spend</u> funds from any of the following sources, in addition to the 3% infant and toddler set-aside, to <u>improve the supply and quality of child care programs and services for infants and toddlers</u> during October 1, 2020 to September?  |
| A. CCDF quality set aside (from all available appropriation years that were spent   |
| during the fiscal year)? ☐ Yes. Amount spent  |
| Comments related to dollar amount provided (optional):  |
| □ No  |
| N/A Describe: California currently does not track the additional amount of funding used outside of the three percent infant toddler set aside used to improve the supply and quality of child care programs and services for infants and toddler.   |
| <ul><li>B. Non-CCDF funds (e.g., TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.)?</li><li>Yes. Amount spent</li></ul>  |
| If yes, describe source(s) of funding.  □ No  |
| N/A Describe: California currently does not track the additional amount of funding used outside of the three percent infant toddler set aside used to improve the supply and quality of child care programs and services for infants and toddler.   |
| C. Coronavirus Aid, Relief, and Economic Security (CARES) Act, 2020 funds?  |
| <ul> <li>☐ Yes. Amount spent</li> <li>If yes, describe how funds were used.</li> <li>☑ No</li> <li>☐ N/A Describe:</li> </ul>   |
| D. Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act, 2021?   |
| ☐ Yes. Amount spent   |
| If yes, describe how funds were used.   |

5.6

|    | ⊠ No  |
|----|---|
|    | □ N/A Describe:   |
| E. | American Rescue Plan (ARP)Act, 2021 Supplemental funding?   |
|    | ☐ Yes. Amount spent   |
|    | If yes, describe how funds were used.   |
|    | ⊠ No  |
|    | □ N/A Describe:   |
| F. | ARP Act, 2021 Stabilization Grant set-aside ONLY. (As a reminder 10% of the ARP Stabilization Grants could be set-aside for administrative expenses, supply building, and technical assistance. This question refers only to this 10%.  □ Yes. Amount spent |
|    | If yes, describe how funds were used.   |
|    | ⊠ No  |
|    | ☐ N/A Describe:   |

## 5.7 Progress Update: Describe the measures used and progress made during October 1, 2020, to September 30, 2021. Include examples and numeric targets where possible.

The California Department of Social Services (CDSS) tracks the number of infant centers that are licensed and identify growth in capacity. The LPCs, per Welfare and Institution Code, are required to conduct a needs assessment no less than every five years. This needs assessment reviews the child care needs of all families in the community for all types of child care, both subsidized and non-subsidized. The needs assessment is then used to determine a local comprehensive countywide child care plan designed to mobilize public and private resources to address identified needs and establish local funding priorities. The LPC's have updated funding priorities to include infant and toddler care as the highest priority based on the local child care needs assessment.

The CCCR&RN periodically releases a state and county level Child Care Portfolio that describes the status of child care. The local R&R agencies track the need for services by the age of the child. In SFY 2020-21, local R&R agencies received 89,852 requests for infant/toddler care.

The CDSS utilizes this data to determine unmet child care needs at the local levels and inform funding for new state and federal funds for direct service contracts to meet communities' need for infant and toddler care.

## 6. Establishing, expanding, or modifying a statewide system of child care resource and referral services

Goal: Lead agency provides services to involve families in the development of their children, information on a full range of child care options, and assistance to families in selecting child care that is appropriate for the family's needs and is high quality as

determined by the lead agency.

6.1 Describe how CCDF quality funds were used to establish, expand, or modify a statewide system of child care resource and referral services during October 1, 2020 to September 30, 2021.

As noted in California's Federal Fiscal Years (FFY) 2019-21 State Plan, California has a robust statewide local child care Resource and Referral (R&R) system with at least one R&R located in each of the 58 counties. Besides receiving core funding for R&R services, R&R agencies continue to receive CCDF funding for the Child Care Initiative Project (CCIP), Health and Safety trainings (provider reimbursement training grants), funding for the Preventative Health & Safety Practices training network and the Strengthening Families training network.

#### 6.2 Spending

| 6.2.1 | Did the lead agency spend funds from any of the following sources to establish, |
|-------|---|
|       | expand, or modify a statewide CCR&R during October 1, 2020 to September 30,     |
|       | 2021?   |

| A. | CCDF quality set aside (from all available appropriation years that were spent during the fiscal year)?  ☑ Yes. Amount spent: \$7,488,174  Comments related to dollar amount provided (optional):  ☐ No  ☐ N/A Describe:  |
|----|---|
| B. | Non-CCDF funds (e.g., TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.)?  ☑ Yes. Amount spent - \$20,388,000.00  If yes, describe source of funding. California spent a total of \$20,388,000 in state general funds.  ☐ No  ☐ N/A Describe: |
| C. | Coronavirus Aid, Relief, and Economic Security (CARES)Act, 2020 funds?  ☐ Yes. Amount spent -  If yes, describe how funds were used.  ☑ No  ☐ N/A Describe:   |
| D. | Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act, 2021?  □ Yes. Amount spent -  If yes, describe how funds were used.  |

|    | ⊠ No  |
|----|---|
|    | ☐ N/A Describe:   |
| E. | American Rescue Plan (ARP) Act, 2021 Supplemental funding?  |
|    | ☐ Yes. Amount spent -   |
|    | If yes, describe how funds were used.   |
|    | ⊠ No  |
|    | ☐ N/A Describe:   |
| F. | ARP Act, 2021 Stabilization Grant set-aside ONLY. (As a reminder 10% of the ARP Stabilization Grants could be set-aside for administrative expenses, supply building, and technical assistance. This question refers only to this 10%.  ☑ Yes. Amount spent \$5,625,000  If yes, describe how funds were used. Investments in California Resource & Referral Agencies, expansion of the California Child Care Initiative Project, and administrative costs associated with distributing stipends. |
|    | No<br>□ N/A Describe:   |

## 6.3 Progress Update: Describe the measures used and progress made during October 1, 2020, to September 30, 2021. Include examples and numeric targets where possible.

The local R&R agencies received additional funding in State Fiscal Year 2021-22. This funding included an additional \$25 million in one-time funding for the current CCIP. This will support an estimated two percent increase in child care supply. The priorities for this funding includes:

- Recruitment of individuals to become licensed Family Child Care Home (FFCH) providers;
- Providing technical assistance (TA) and ongoing support of potential new providers;
- Providing TA and other identified supports to assist child care providers who have closed due to public health, financial hardship, or other reasons related to the COVID-19 pandemic in reopen their facilities; and
- Providing professional development (PD) opportunities focused on child development, health and safety, and family child care business practices for targeted participants.

The California Department of Social Services will track progress using, but not limited to, the following measures:

- The number of new or re-opened child care providers;
- The number of child care providers opened in designated child care deserts; and
- The number of stipends and PD opportunities provided.

## 7. Facilitating compliance with lead agency requirements for inspection, monitoring, health and safety standards and training, and lead agency

### licensing standards

Goal: To ensure child care providers maintain compliance with lead agency licensing, inspection, monitoring, and health and safety standards and training.

## 7.1 Has the lead agency aligned CCDF health and safety standards with the following?

| a. | Licensing standards                 |
|----|-------------------------------------|
|    |                                     |
|    | $\square$ No. If not, describe why: |
| b. | Caring for Our Children Basics      |
|    |                                     |
|    | $\square$ No. If not, describe why: |
| c. | Head Start                          |
|    |                                     |
|    | $\square$ No. If not, describe why: |
| d. | State pre-k                         |
|    |                                     |
|    | ☑ No. If not, describe why:         |

## 7.2 Complaints regarding child care providers received during October 1, 2020 to September 30, 2021

- 7.2.1 How many complaints were received regarding providers during October 1, 2020 to September 30, 2021?
  - a. Licensed providers # 3,424
  - b. License-exempt providers # Unknown. California does not track this data.
- 7.2.2 What was the average length of time between receiving the complaint and taking steps to respond to a complaint during October 1, 2020 to September 30, 2021?
  6 days
- 7.2.3 How many complaints received an on-site follow-up inspection during October 1, 2020to September 30, 2021? # Unknown
- 7.2.4 How many of the complaints resulted in one or more *substantiated* violations in the program or provider site identified during October 1, 2020 to September 30, 2021? # 558
- 7.2.5 How many child care providers had CCDF funding revoked as a result of an

inspection during October 1, 2020 to September 30, 2021? # Unknown 7.2.6 How many child care providers closed as a result of an inspection during October 1,2020 to September 30, 2021? # 122

7.2.7 Please provide any additional information regarding health and safety complaints and inspections in the state or territory during October 1, 2020 to September 30, 2021.

There were 122 licensed provider closures due to failure to comply with State law and regulations. However, the licensing data system (IBM Lotus Notes software) does not differentiate whether providers closed as a direct result of an inspection or for other reasons. The closures most often resulted from a licensing inspection, licensing complaint investigation, and/or licensing responding to cross-reporting/notification from police or Child Protective Services. During the COVID-19 pandemic, the California Department of Social Service (CDSS) Community Care Licensing Division (CCLD) continued to investigate complaints that posed an immediate health and safety risk. These complaints were investigated onsite at the facility as needed. Complaints that did not pose an immediate health and safety risk were investigated remotely. CCLD resumed in-person complaint investigations for all complaints in June 2021.

# 7.3 How many child care programs received coaching or technical assistance to improve their understanding and adherence to CCDF health and safety standards (as a result of an inspection or violation) during October 1, 2020 to September 30, 2021?

- a. Licensed center-based programs # 30
- b. License-exempt center-based programs # N/A
- c. Licensed family child care # 6
- d. License-exempt family child care (care in providers' home) # N/A
- e. In-home (care in the child's own home) # N/A
- f. N/A Describe.

## 7.4 How many providers received virtual monitoring from October 1, 2020 to September 30, 2021?

| ☑ Total # 5,096  |
|--|
| ∠ Licensed or registered center-based programs # 2971          |
| ☐ License-exempt center-based programs #                       |
| ∠ Licensed or registered family child care # 2125              |
| ☐ License-exempt family child care (care in providers' home) # |
| $\square$ In-home (care in the child's own home) #             |
| ☐ Programs serving children who receive CCDF subsidy #         |
|  |

### 7.5 Spending:

compliance with lead agency requirements for inspections, monitoring, health and safety standards and training, and lead agency licensing standards during October 1,2020 to September 30, 2021? A. CCDF quality set aside (from all available appropriation years that were spent during the fiscal year)? Comments related to dollar amount provided (optional): □ No ☐ N/A Describe: B. Non-CCDF funds (e.g., TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.)? ✓ Yes. Amount spent: \$250,000 If yes, describe source(s) of funding. California spent a total of \$250,000 in state general funds. □ No ☐ N/A Describe: C. Coronavirus Aid, Relief, and Economic Security (CARES) Act, 2020 funds? ☐ Yes. Amount spent If yes, describe how funds were used. ⊠ No ☐ N/A Describe: D. Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act, 2021? ☐ Yes. Amount spent If yes, describe how funds were used. ⋈ No □ N/A Describe: E. American Rescue Plan (ARP) Act, 2021 Supplemental funding? ☐ Yes. Amount spent If yes, describe how funds were used. ⊠ No □ N/A Describe: F. ARP Act, 2021 Stabilization Grant set-aside ONLY. (As a reminder 10% of the ARP Stabilization Grants could be set-aside for administrative expenses, supply building, and technical assistance. This question refers only to this 10%. ✓ Yes. Amount spent: \$5,625,000 If yes, describe how funds were used. Investments in California Resource

& Referral Agencies, expansion of the California Child Care Initiative

7.5.1 Did the lead agency spend funds from any of the following sources on facilitating

Project, and administrative costs associated with distributing stipends.

☐ N/A Describe.

7.6 Progress Update: Describe the measures used and progress made during October 1, 2020 to September 30, 2021. Include examples and numeric targets where possible.

After annual inspections were suspended due to the COVID-19 pandemic, the CDSS issued a Provider Information Notice (PIN) PIN 21-08-CCLD on May 28, 2021 announcing that annual inspections would resume in late Spring 2021. The PIN provides information on how the CDSS would safely conduct on-site inspections during the COVID-19 pandemic.

The CCLD also completed development of the Compliance and Regulatory Enforcement (CARE) Tools for use in all programs, including the Child Care Licensing Program. The CARE Tools is used by Licensing Program Analysts (LPAs) when conducting inspections in licensed facilities. The CDSS published PIN 21-25-CCP to announce the statewide launch of the CARE tool.

In response to the COVID-19 pandemic and school closures, the CDSS established waivers for Emergency Temporary Child Care Programs to meet capacity needs and provide short term solutions for provision of care. During the COVID-19 pandemic, the CDSS approved waivers for over 980 pop-up facilities to meet child care needs of essential workers. Currently, the CDSS oversees waivers for a total of 840 pop-up facilities.

8. Evaluating the quality of child care programs in the state or territory, including evaluating how programs positively impact children

Goal: Lead agency investment in effective quality improvement strategies using reliable datafrom evaluation and assessment.

8.1 What measure(s) or tool(s), and studies did the lead agency use to evaluate and assess the quality of programs and effective practice in center-based programs during October 1, 2020 to September 30, 2021?

☑ To measure program quality, describe:

In order to measure program quality, California's center-based programs engaged in the Quality Counts California (QCC) use the Environment Rating Scales (ERS) tools of assessment. As described by the tool developer, "Process quality consists of the various interactions that go on in a classroom between staff and children, staff, parents, and other adults, among the children themselves, and the interactions children have with the many materials and activities in the environment, as well as those features, such as interactions" (<a href="https://ers.fpg.unc.edu/environment-rating-scales">https://ers.fpg.unc.edu/environment-rating-scales</a>).

☑ To measure effective practice, describe:

In order to measure effective practice, California's center-based programs engaged in the QCC use the Classroom Assessment Scoring System (CLASS) with infants, toddlers, and preschoolers. As described by the tool developer, CLASS helps providers nurture children's early learning while responding to their needs. As children enter preschool, their sense of themselves is grounded in, and dependent on, relationships. CLASS helps teachers foster a secure, supportive base for learning and exploration" (https://teachstone.com/class/).

☑ To measure age appropriate child development, describe:

In order to measure age-appropriate child development, California's center-based programs use the Desired Results Developmental Profile (2015) [DRDP92015)] assessment instrument. The DRDP (2015) instruments are designed for teachers to observe, document and reflect on the learning, development and progress of children birth through 12 years of age. The assessment results are intended to be used by the teacher to plan curriculum for individual and groups of children and to guide continuous program improvement. The DRDP (2015) is one element of the Desired Result System, a comprehensive approach that facilitates the achievement of the Desired Results identified for children and families. California is one of the few states in the nation that has developed its own system designed specifically for measuring child progress toward desired outcomes. The system is aligned to both the state's learning and development foundations for early care and education programs and the content standards for kindergarten

(https://www.desiredresults.us/).

|   | Other, describe: |
|---|------------------|
| П | N/A Describe:    |

8.2 What measure(s) or tool(s), and studies did the lead agency use to evaluate the quality of program(s) and effective practice in family child care programs during October 1, 2020 to September 30, 2021?

☑ To measure program quality, describe:

In order to measure program quality, California's Family Child Care Home (FCCH) programs engaged in the QCC program used the ERS tools of assessment. As described by the tool developer, "Process quality consists of the various interactions that go on in a classroom between staff and children, staff, parents, and other adults, among the children themselves, and the interactions children have with the many materials and activities in the environment, as well as those features, such as space, schedule, and materials that support these interactions"

(https://ers.fpg.unc.edu/environment-rating-scales).

☑ To measure effective practice, describe:

In order to measure effective practice, California's FCCH programs engaged in the

QCC program used the CLASS with infants, toddlers, and preschoolers. As described by the tool developer, "CLASS helps providers nurture children's early learning while responding to their needs. As children enter preschool, their sense of themselves is grounded in, and dependent on, relationships. CLASS helps teachers foster a secure, supportive base for learning and exploration" (https://teachstone.com/class/).

☑ To measure age appropriate child development, describe:

In order to measure age appropriate child development, California's FCCH programs engaged in the QCC program use the DRDP (2015) assessment instrument. The DRDP (2015) instruments are designed for teachers to observe, document and reflect on the learning, development and progress of children birth through 12 years of age. The assessment results are intended to be used by the teacher to plan curriculum for individual and groups of children and to guide continuous program improvement. The DRDP (2015) is one element of the Desired Result System, a comprehensive approach that facilitates the achievement of the Desired Results identified for children and families. California is one of the few states in the nation that has developed its own system designed specifically for measuring child progress toward desired outcomes. The system is aligned to both the state's learning and development foundations for early care and education programs and the content standards for kindergarten

(https://www.desiredresults.us/).

| ☐ Other, describe: |  |
|--------------------|--|
| ☐ N/A. Describe:   |  |

### 8.3 Spending:

8.3.1 Did the lead agency spend funds from any of the following sources on <u>evaluating the quality of child care programs</u>, <u>practice</u>, <u>or child development</u> during October 1, 2020 to September 30, 2021?

| A. | CCDF quality set aside (from all available appropriation years that were spent during the fiscal year)?  ☑ Yes. Amount spent: \$28,965,854  Comments related to dollar amount provided (optional):   |
|----|--|
|    |  |
|    |  |
|    | ☐ N/A Describe:  |
| B. | Non-CCDF funds (e.g., TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.)?  |
|    | ☐ Yes. Amount spent  |
|    | If yes, describe source(s) of funding.   |
|    | No     No |
|    | □ N/A Describe:  |

| Ċ. | ☐ Yes. Amount spent   |
|----|---|
|    | If yes, describe how funds were used.   |
|    | ⊠ No  |
|    | □ N/A Describe:   |
| D. | Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act, 2021?  |
|    | ☐ Yes. Amount spent   |
|    | If yes, describe how funds were used.   |
|    | ⊠ No  |
|    | □ N/A Describe:   |
| E. | American Rescue Plan (ARP)Act, 2021 Supplemental funding?                       |
|    | ☐ Yes. Amount spent   |
|    | If yes, describe how funds were used.   |
|    | ⊠ No  |
|    | □ N/A Describe:   |
| F. | ARP Act, 2021 StabilizationGrant set-aside ONLY. (As a reminder 10% of the      |
|    | ARP Stabilization Grants could be set-aside for administrative expenses, supply |
|    | building, and technical assistance. This question refers only to this 10%.      |
|    | ☐ Yes. Amount spent   |
|    | If yes, describe how funds were used.   |
|    | ⊠ No  |
|    | □ N/A Describe:   |
|    |   |

8.4 Progress Update: Describe the measures used and progress made during October 1, 2020, to September 30, 2021. Include examples and numeric targets where possible.

In California, the DRDP (2015) provides a mechanism for studying children's progress towards readiness for kindergarten. A criterion-referenced approach for evaluating progress toward kindergarten readiness was applied to the DRDP (2015) assessment. This application resulted in the identification of criterion-based boundaries that correspond to the expectations for children's learning and development specified in the state's early learning foundations and kindergarten standards.

This criterion-referenced approach was applied to the five essential readiness domains of the DRDP:

- (1) Approaches to Learning Self-Regulation (ATL-REG);
- (2) Social and Emotional Development (SED);
- (3) Language and Literacy Development (LLD);
- (4) Cognition, including Math and Science (COG); and
- (5) Physical Development and Health (PD-HLTH).

Rather than dividing children into one of two groups, i.e., "ready" and "not ready," four zones" were used to more accurately categorize children's progress toward readiness. The four zones were defined as follows:

- (1) Confident that children have not reached the boundary;
- (2) Likely that children have not reached the boundary, but some may have;
- (3) Likely that children have reached the boundary, but some may not have; and
- (4) Confident that children have reached the boundary.

Unfortunately, due to the COVID-19 pandemic and a huge fluctuation of children's attendance, the state modified the requirements for the DRDP (2015) and the ERS. For State Fiscal Year 2020-21 the DRDP (2015) first assessment due date was moved to no later than 90 days from the time of the child's first day of enrollment (an increase of 30 days) and allowed for the continued utilization of the "DRDP Modified Essential View" established in the previous fiscal year as a direct result of the COVID-19 pandemic. In addition, the ERS data collection protocols were adjusted to conform with the Environmental Rating Scales Institute guidance for use of the ERS during the COVID-19 pandemic. Therefore, the data results collected were not representative of the population served or comparable to data sets from prior years.

### 9. Supporting providers in the voluntary pursuit of accreditation

Goal: Support child care programs and FCCs in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of quality.

| 9.1 How many providers did the lead agency support in their pursuit of accreditation | 'n |
|--|----|
| during October 1, 2020 to September 30, 2021?  |    |

| U       | ·  |
|---------|--|
|         | ☐ Yes, providers were supported in their pursuit of accreditation  |
|         | a. Licensed center-based programs #  |
|         | b. License-exempt center-based programs #  |
|         | c. Licensed family child care #  |
|         | d. License-exempt family child care (care in providers' home) #  |
|         | e. Programs serving children who receive CCDF subsidy #  |
|         | No lead agency support given to providers in their pursuit of accreditation.   |
|         | □ N/A. Describe.   |
| 9.2 Spe | nding  |
|         | Did the lead agency spend funds from any of the following sources on <u>accreditation</u> g October 1, 2020 to September 30, 2021? |

A. CCDF quality set aside (from all available appropriation years that were spent

Comments related to dollar amount provided (optional):

during the fiscal year)?

 $\bowtie$  No

☐ Yes. Amount spent

|    | □ N/A Describe:  |
|----|--|
| B. | Non-CCDF funds (e.g., TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.)?                                      |
|    | ☐ Yes. Amount spent  |
|    | If yes, describe source(s) of funding.   |
|    | ⊠ No   |
| _  | □ N/A Describe:  |
| C. | Coronavirus Aid, Relief, and Economic Security (CARES)Act, 2020 funds?   |
|    | If yes, describe how funds were used.  |
|    | ⊠ No   |
|    | □ N/A Describe:  |
| D. | Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act,   |
|    | 2021?  |
|    | ☐ Yes. Amount spent  |
|    | If yes, describe how funds were used.  |
|    | ⊠ No   |
|    | □ N/A Describe:  |
| E. | American Rescue Plan (ARP)Act, 2021 Supplemental funding?  |
|    | ☐ Yes. Amount spent  |
|    | If yes, describe how funds were used.  |
|    | ⊠ No   |
|    | □ N/A Describe:  |
| F. | ARP Act, 2021 StabilizationGrant set-aside ONLY. (As a reminder 10% of the ARP Stabilization Grants could be set-aside for administrative expenses, supply |
|    | building, and technical assistance. This question refers only to this 10%.   |
|    | ☐ Yes. Amount spent  |
|    | If yes, describe how funds were used.  |
|    | ⊠ No   |
|    | □ N/A Describe.  |
|    |  |

9.3 Progress Update: Describe the measures used and progress made during October 1,2020 to September 30, 2021. Include examples and numeric targets where possible.

The state does not spend any funds on supporting providers with the voluntary pursuit of accreditation.

10. Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity,

### and physical development.

10.2

Goal: Assist programs to meet high-quality comprehensive program standards relating to health, mental health, nutrition, physical activity, and physical development.

# 10.1 Quality Indicators: Does the lead agency have quality improvement standards that include indicators covering the following areas beyond what is required for licensing?

| Physical activity and physical development in child care setting   | ngs    |
|--|--------|
|  |        |
|  |        |
| ∠ Learning environment and curriculum  |        |
| ☑ Ratios and group size  |        |
| Staff/provider qualifications and professional development   |        |
| □ Teacher/provider-child relationships   |        |
| ☑ Teacher/provider instructional practices   |        |
| Family partnerships and family strengthening   |        |
| ☐ Other. Describe.   |        |
| □ No   |        |
| 2 Spending   |        |
| 10.2.1 Did the lead agency spend funds from any of the following sources on  |        |
| supporting the development or adoption of high-quality program standards related   | ed to  |
| health, mental health, nutrition, physical activity, and physical development dur  | ing    |
| October 1, 2020 to September 30, 2021?   |        |
| A. CCDF quality set aside (from all available appropriation years that were during the fiscal year)?                     | spent  |
|  |        |
| Comments related to dollar amount provided (optional):   |        |
| □ No   |        |
| □ N/A Describe:  |        |
| B. Non-CCDF funds (e.g., TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.)? |        |
| Yes. Amount spent: \$1,205,315   |        |
| If yes, describe source(s) of funding. California spent a total of \$1,2 in state general funds.                         | 05,315 |
| date general fande.  |        |

|    | □ No  |
|----|---|
|    | ☐ N/A Describe:   |
| C. | Coronavirus Aid, Relief, and Economic Security (CARES)Act, 2020 funds?  |
|    | If yes, describe how funds were used.   |
|    | ⊠ No  |
|    | □ N/A Describe:   |
| D. | Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act, 2021?  |
|    | ☐ Yes. Amount spent -   |
|    | If yes, describe how funds were used.   |
|    | ⊠ No  |
|    | □ N/A Describe:   |
| E. | American Rescue Plan (ARP)Act, 2021 Supplemental funding?   |
|    | ☐ Yes. Amount spent -   |
|    | If yes, describe how funds were used.   |
|    | ⊠ No  |
|    | □ N/A Describe:   |
| F. | ARP Act, 2021 Stabilization Grant set-aside ONLY. (As a reminder 10% of the ARP Stabilization Grants could be set-aside for administrative expenses, supply building, and technical assistance. This question refers only to this 10%.  Yes. Amount spent - \$6,950,000 |
|    | If yes, describe how funds were used. Investments in California Resource & Referral Agencies, expansion of the California Child Care Initiative   |
|    | Project, Infant and Early Childhood Mental Health, and administrative costs   |
|    | associated with distributing stipends.  |
|    | □ No  |
|    | □ N/A Describe.   |
|    |   |

10.3 Progress Update: Describe the measures used and progress made during October 1, 2020, to September 30, 2021. Include examples and numeric targets where possible.

The California Department of Social Services (CDSS) has 12 Program Quality Implementation consultants that monitor programs under contract with the CDSS. These consultants review the programs self-evaluations as well as conduct on-site monitoring and technical assistance (TA). TA is used to support providers in their adoption of program standards. For Federal Fiscal Year 2020-21, TA was provided virtually due to the impact of the COVID-19 pandemic.

The Quality Counts California (QCC) Block Grant and the QCC Workforce Pathways

Grant continues to be funded with the use of CCDF quality investment funds. A total of 49 grantees were awarded QCC Workforce Pathways grant funding in State Fiscal Year (SFY) 2020-2021 and SFY 2021-2022 to incentivize the workforce at the local levels. The CDSS is currently collecting SFY 2020-21 workforce data which will include the number of participants that received stipends or other incentives. It is anticipated that the CDSS will have a complete analysis of this data in early 2022. The CDSS continues to partner with sister agencies under the umbrella of the QCC system which supports continuous quality improvement and professional development (PD) opportunities to the workforce.

The SFY 2021-2022 the California budget invested one-time expansion funding for the Infant and Early Childhood Mental Health Consultation (IECMHC), formerly the California Inclusion and Behavior Consultation (CIBC), which provides mental health and behavioral consultation services for child care and development programs (including Family Child Care Home and Family, Friend and Neighbor (FFN) providers) in the form of training, technical assistance, consultation and/or materials related to health, safety, traumainformed practices and children's social-emotional development. Services will be designed to support the expertise, best practices and well-being of providers to promote the health, safety, and well-being of children and families impacted by the COVID-19 pandemic. This new focus builds the capacity of IECMHC available to support programs and providers in California and to expand infant and early childhood mental health direct consultation and supports to programs and providers who were previously unable to access services

Additional online PD opportunities have been launched and/or are in the process of being developed. These PD opportunities include modules (as described below) and are available on the California Early Childhood Online (CECO) PD platform.

The "Health and Safety: Resources and Guidance for Caring for Children" modules are currently available on CECO. These modules provide an overview of basic health and safety considerations and standards for providing emergency care for children of essential workers. It includes guidance on how to stop the spread of germs in a group setting during the COVID-19 pandemic. These modules can be accessed at <a href="https://caearlychildhoodonline.org/">https://caearlychildhoodonline.org/</a>.

A total of eight comprehensive Health and Safety modules are available on CECO. Each module is 60-80 minutes in duration. Modules include the following topics:

- -Safe Spaces in Child Care
- -Transporting Children in Child Care
- -Handling Hazardous Material in Child Care
- -Infectious Diseases in Child Care
- -Safe Sleep Practices and Sleep Related Infant Deaths
- -Managing and Responding to Food Allergies
- -Shaken Baby/Abusive Head Trauma
- -Emergency Preparedness in Child Care

California also released an additional four, two-hour modules covering the same eight health and safety topics in English and Spanish to meet the need of FFN providers.

The CDSS is in the process of completing additional PD opportunities to include Trauma Informed Practices (TIP), Implicit Bias, Coaching Modules and "STEAM Starters" in the coming year. The TIP series will include five modules containing nine hours of online content and a facilitator guide. These TIP modules will include a means to integrate video-recorded interviews of leading experts on trauma-informed practices, opportunities for reflection and journaling, opportunities for participants to contribute to the shared body of knowledge based on their own expertise, and optional interaction with a facilitator to guide paired dialogue between participants in a learning cohort and cohort learning experiences.

Similar to the TIP modules, the Implicit Bias modules will contain four modules with 12 hours of online content with a corresponding facilitator guide.

The Coaching series will include six modules for trainers and coaches designed to build specific skills in California's Adult Learning Competencies. The modules will include: 1) Orientation to Adult Learning/Adult Learning: Theory and Research; 2) Operationalizing Equity in Coaching and Training; 3) Positive, trusting relationships; Communication and interaction; 4) Learner directed; Lifelong learning stance; 5) Conflict resolution; Addressing barriers to learning; and 6) Using technology.

Finally, the STEAM Starters activity modules will include a set of starting point guides, video vignettes, and the STEAM Starter community of practice resources for teachers and others in the Early Learning and Care system.

In addition to online PD modules, the CDSS contracted with El Dorado County Office of Education (EDCOE) to implement a statewide expansion of the QCC Coaching Companion. The purpose of this project is to provide Coaching Companion access, training and support for up to 300 additional QCC coaches across California. Coaching Companion creates sustainable virtual coaching option where teachers can see themselves in practice and engage in thoughtful self-reflection with their coach. Using the Custom Coaching Companion can help alleviate travel concerns and increase the dosage of interactions between teachers and coaches. The EDCOE Early Learning and Family Support/QCC Region 3 Training and Technical Assistance Hub collaborated with University of Washington to pilot a California version of the Coaching Companion platform beginning in August of 2018, which included significant customization and licenses for the coaches within QCC Region 3. After two years of the pilot program, and several rounds of customization and content creation, the EDCOE now supports coaches in twenty-six (26) counties. In addition, project leaders meet with Tribal Child Care Association of California (TCCAC) leaders to assess direct coaching needs in tribal communities in California. The TCCAC expressed interest and will include Coaching Companion cycles as one of the pathways they are creating for teachers. Based on high interest following a presentation given at their "Reuniting Our Spirit" conference, 10 of the direct coaching spots were offered to TCCAC. They will focus on their tribal childcare centers identifying one person from each site.

11. Other activities to improve the quality of child care services supported byoutcome measures that improve provider preparedness, child safety, child well-being, or kindergarten-entry

Goal: To improve the quality of child care programs and services related to outcomes measuringimproved provider preparedness, child safety, child well-being, or kindergartenentry.

11.1 Did the state or territory set up a grant program (NOT including American RescuePlan Act stabilization grants) designed to sustain the child care supply or

| provide sustainability funding to child care providers due to the COVID-19 pandemic?   |
|--|
| Yes. If yes, describe and check which types of providers were eligible and   |
| number served.   |
| Licensed center-based programs #   |
| License-exempt center-based programs #   |
| ☐ Licensed family child care #   |
| License-exempt family child care (care in providers' home) #   |
| ☐ In-home (care in the child's own home) #   |
| ☐ Other (explain)  |
| □ No.  |
| N/A. Describe: Pursuant to Senate Bill (SB) 820 (Chapter 110, Statutes of 2020), CARES funding was allocated to provide stipends to state-subsidized child care providers to address any hardships incurred as a result of various economic factors related to the COVID-19 pandemic, such as decreased enrollment, increased teacher-to-child ratios, and other increased costs, to ensure that child care providers maintain high-quality care, access, and safety for workers and families in their child care programs. These stipends were issued in November 2020. The CDSS does not have data on the numbers of providers who received these stipends by provider type. |
| 11. 2 Did the lead agency provide cleaning supplies and/or personal protective equipment (PPE) to child care providers either through funding or directly in-kind due to the COVID-19 pandemic?  Yes. If yes, describe.  |
| and check which types of providers were eligible:  |
| <ul> <li>Licensed center-based programs</li> </ul>   |
| <ul> <li>License-exempt center-based programs</li> </ul>   |
| ☐ Licensed family child care   |
| <ul> <li>License-exempt family child care (care in providers' home)</li> </ul>   |
| ☐ In-home (care in the child's own home)   |
| ☐ Other (explain)  |
| ⊠ No.  |
| □ N/A. Describe.   |

11.3 Did the state/territory invest in data systems to support equitable access to child care(e.g., modernizing and maintaining systems; technology upgrades and data governance improvements to provide more transparent and updated information to parents; a workforce registry; updated QRIS systems; CCR&R updates; monitoring systems) from October 1, 2020 to September 30, 2021?

Yes. Describe: California acknowledges information and data necessary for administration of child care programs are currently spread across a variety of sources at the State, local, private, and non-profit levels, which limits the ability to make informed decisions, transparency across programs, and creates barriers to consumer education risking public trust in the system and hampers program administration and data-driven policy making. In an effort to modernize the technological and data supports for the child care and development system, the California Department of Social Services (CDSS) has begun the Brilliant Beginnings Initiative. Brilliant Beginnings will maximize parent choice through consumer education, support providers with a technology solution to simplify business processes and consolidate information from various sources to enable streamlined state administration and continuous quality improvement.

This cloud-based and centralized data environment will include components such as a Consumer Education web-portal and California Serving Providers and Reaching Kids (CalSPARK). Brilliant Beginnings will also mesh seamlessly with connected CDSS efforts such as Community Care Licensing Facility Management System, Guardian, and the Statewide Verification Hub as well as capturing and sharing data outside of the department with systems such as MyChildCarePlan.org and the California Early Care and Education Workforce Registry, or at the California Health and Human Services agency level for the Early Childhood Integrated Data System and Cradle to Career will also be simplified.

This effort will also include focus on the Brilliant Beginnings' flagship project, CalSPARK. CDSS is following Human-Centered Design principals when developing the CalSPARK business analysis and to document the existing child care domain - including user research, process mapping, journey mapping, prototyping, storyboarding, persona development, and working with users and internal and external stakeholders to surface key design choices (e.g., implementation and scaling, procurement, vendor management, change management, high level technical architecture).

| Brilliant Beginnings and the CalSPARK system are at the beginning of its | s development |
|--|---------------|
| with a multi-year project plan underway.                                 |               |

□ No

11.4 Did the state/territory conduct an analysis of supply and demand or other needs assessment to identify areas of focus to build supply or target funding from October 1, 2020to September 30, 2021?

Yes. Describe findings: The California Child Care Resource & Referral Network (CCCR&RN) tracks the changing child care landscape by county and statewide through the Child Care Portfolio. The most recent biennial study found a decrease in licensed center-based child care centers and licensed Family Child Care Home (FCCH) providers. These providers meet only 15 percent of the total licensed child care needs in California. There has been a decline in licensed FCCH providers who uniquely meet the needs of working families providing care for infants and toddlers. These providers usually offer smaller group sizes and flexible hours of care, creating an overall positive effect for parents; yet their decline leaves a large unmet need (<a href="https://rrnetwork.org/research/child\_care\_portfolio">https://rrnetwork.org/research/child\_care\_portfolio</a>).

As a result of the COVID -19 pandemic the total number of licensed FCCH providers decreased by 3,636. Over 7,590 licensed FCCH providers closed, but only 2,674 new child care providers opened and only 960 reopened. A total of 9,699 licensed center-based providers closed during the pandemic. (https://rrnetwork.org/assets/general-files/California.pdf).

Additionally, the CCCR&RN conducted a parent survey to assess parent need (<a href="https://rrnetwork.org/assets/general-files/Parent-Survey-10.6.pdf">https://rrnetwork.org/assets/general-files/Parent-Survey-10.6.pdf</a>). Findings included a recommendation to examine the 12-month eligibility criteria, eliminating the family fee requirement, extending hours eligible for reimbursement, and adding more flexible funding in high–growth geographic areas with density of low-wage workers.

The survey's results were used to (1) create materials in multiple languages; (2) compile outreach packages and stipends to help with licensing fees; (3) allocating federal relief funds to support existing providers struggling to stay open; and (4) supporting child care providers who have recently closed and are trying to reopen. The SFY 2021-22 allocated \$25 million to be spent over two years in 58 counties to support child care providers and to meet the parental need, to address child care deserts, and support providers who want to re-open.

## 11.5 Describe how supply building grants were used with a lens towards Diversity, Equity and Inclusion:

In State Fiscal Year 2021-22, California allocated an additional \$10 million in ongoing funding to local R&R agencies to complete their basic tasks and to support the stabilization of the child care market. California's population has shifted significantly enough to increase the need for child care. To that end, the CDSS worked with the local R&R agencies to confirm and approve the data used to determine allocations based on a new equity formula. The formula was determined by assessing birth rates, population increases, and noting the number of children living in poverty. Additionally, the equity formula is based on the economic impact of the COVID-19 pandemic, child care deserts and/or regional disparities.

### 11.6 How many providers received the following from October 1, 2020 to

### September 30,2021?

### A. Increased rates

- a. Licensed or registered center- based program: 0
- b. License-exempt center-based program; 0
- c. Licensed or registered family child care: 0
- d. License-exempt family child care (care in the provider's home): 0
- e. In-home (care in the child's own home): 0

### B. Increased wages

- a. Licensed or registered center- based program: 0
- b. License-exempt center-based program; 0 A
- c. Licensed or registered family child care: 0
- d. License-exempt family child care (care in the provider's home): 0
- e. In-home (care in the child's own home): 0

### C. Benefits: health insurance

- a. Licensed or registered center- based program: 0
- b. License-exempt center-based program: 0
- c. Licensed or registered family child care: 0
- d. License-exempt family child care (care in the provider's home): 0
- e. In-home (care in the child's own home): 0

### D. Mental Health supports

- a. Licensed or registered center- based program: 88
- b. License-exempt center-based program: 0
- c. Licensed or registered family child care: 8
- d. License-exempt family child care (care in the provider's home): 0
- e. In-home (care in the child's own home): 0

### E. Start-up funds

- a. Licensed or registered center- based program: 0
- b. License-exempt center-based program: 0
- c. Licensed or registered family child care: 0
- d. License-exempt family child care (care in the provider's home): 0
- e. In-home (care in the child's own home): 0

### F. Other: Describe and #: 0

- a. Licensed or registered center- based program: 0
- b. License-exempt center-based program: 0
- c. Licensed or registered family child care: 0
- d. License-exempt family child care (care in the provider's home): 0
- e. In-home (care in the child's own home): 0

### 11.7 How many providers received the following technical assistance from October 1, 2020to September 30, 2021?

### A. Business Practices

- a. Licensed or registered center- based program: 7,137
- b. License-exempt center-based program; 1,541
- c. Licensed or registered family child care: 27,060
- d. License-exempt family child care (care in the provider's home): 14,176
- e. In-home (care in the child's own home): 213

### B. Emergency preparedness training

- a. Licensed or registered center- based program: 11,732
- b. License-exempt center-based program; 2,406
- c. Licensed or registered family child care: 21,95 1
- d. License-exempt family child care (care in the provider's home): 11,216
- e. In-home (care in the child's own home): 902

### C. Benefits: Other: Trauma informed practices, food pantry giveaways, COVID-19 related health practices

- a. Licensed or registered center-based program: 7,719
- b. License-exempt center-based program: 1,065
- c. Licensed or registered family child care: 35,932
- d. License-exempt family child care (care in the provider's home): 11,487
- e. In-home (care in the child's own home): 425

### 11.8 Spending:

| 11.8.1 Did the lead agency spend funds from any of the following sources on <u>other</u> <u>activities to improve the quality of child care services</u> during October 1, 2020 to |
|--|
| September 30, 2021?  |
| A. CCDF quality set aside (from all available appropriation years that were spent during the fiscal year)?   |
|  |
| Comments related to dollar amount provided (optional):   |
| □ No   |
| □ N/A Describe:  |
| B. Non-CCDF funds (e.g., TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.)?   |
|  |
| If yes, describe source(s) of funding. California spent a total of \$20,715,750  |
| in state general funds.  |
| □ No   |
| ☐ N/A Describe:  |
| C. Coronavirus Aid, Relief, and Economic Security (CARES) Act. 2020 funds?   |

If yes, describe how funds were used. Pursuant to Senate Bill (SB) 820 (Chapter 110, Statutes of 2020), CARES funding was allocated to provide

|    | stipends to state-subsidized child care providers to address any hardships incurred as a result of various economic factors related to the COVID-19 pandemic, such as decreased enrollment, increased teacher-to-child ratios, and other increased costs, to ensure that child care providers maintain high-quality care, access, and safety for workers and families in their child care programs. These stipends were issued in November 2020. The CDSS does not have data on the numbers of providers who received these stipends by provider type.  No N/A Describe: |
|----|--|
| D  | Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act,   |
| υ. | 2021?  |
|    | ☐ Yes. Amount spent  |
|    | If yes, describe how funds were used.  |
|    | ⊠ No   |
|    | □ N/A Describe:  |
| E. | American Rescue Plan (ARP)Act, 2021 Supplemental funding?  |
|    | Yes. Amount spent  |
|    | If yes, describe how funds were used.  |
|    | ⊠ No   |
|    | □ N/A Describe:  |
| F. | ARP Act, 2021 Stabilization Grant set-aside ONLY. (As a reminder 10% of the ARP Stabilization Grants could be set-aside for administrative expenses, supply building, and technical assistance. This question refers only to this 10%.  ☑ Yes. Amount spent: \$5,625,000.00  If yes, describe how funds were used.  Investments in California Resource & Referral Agencies, expansion of the California Child Care Initiative Project, and administrative costs associated   |
|    | with distributing stipends.  |
|    | □ No   |
|    | □ N/A Describe.  |
|    |  |

# 11.9 Progress Update: Describe the measures used and progress made during October 1, 2020, to September 30, 2021. Include examples and numeric targets where possible:

There are several activities and projects used to support and increase the quality of California's child care programs. Quality improvement projects are created to serve children in a developmentally appropriate and research based manner. These projects utilize a variety of child development subject-matter experts and analyze data reported on the outcomes of projects and programs. Data is used to improve the level of quality and improve outcomes for children. Below is a highlight of some of the quality investment

projects and the progress made.

Beginning Together: Caring for Young Children with Disabilities in Inclusive Settings. The purpose of Beginning Together is to ensure that children with special needs are incorporated, and to promote appropriate inclusive practices in trainings and the technical assistance provided by existing trainers in California. This is accomplished through a "training of trainers" institute, regional outreach activities, revision/development of written materials, support to institute graduates, and support of inclusive practices in other Program for Infant and Toddler Care (PITC) activities (https://cainclusion.org/bt/). Measure to Evaluate: More children, birth to five, with an Individualized Family Service Plan (IFSP) or Individualized Education Program (IEP) will be served in community-based settings alongside their non-disabled peers, improving their opportunities for development.

California Collaborative for Social and Emotional Foundations for Early Learning (CA CSEFEL). The CA CSEFEL Teaching Pyramid approach was built on the Positive Behavior Intervention and Support model and incorporates quality early childhood practices. The WestEd Center for Child and Family Studies (WestEd) offers comprehensive professional development (PD) packages for infant/toddler, family child care, preschool and early elementary educators. The CA CSEFEL Teaching Pyramid is based on practices originally developed by the Center on the Social Emotional Foundations in Early Learning. WestEd has further adapted the approach to incorporate the "facilitative administrative practices" described in research. The power of the CA CSEFEL Teaching Pyramid is most clearly seen when it is implemented across an entire site, district, or agency (i.e. program-wide). There are six recommended components for achieving a program-wide approach: 1) planning by a group of leaders; 2) training in a systematic way: 3) coaching and technical assistance to support implementation to fidelity; 4) incorporation of family engagement to strengthen the link between home and school; 5) identification and training of those responsible for the development of positive behavior support plans; and 6) follow-up for sustainability after training ends (https://cainclusion.org/teachingpyramid/). Measure to Evaluate: Sites implementing CA CSEFEL Teaching Pyramid to fidelity will have reduced instances of expulsions, fewer children inappropriately referred for special education services, and more children supported to be confident and ready to enter kindergarten.

The PITC (https://www.pitc.org/) believes responsive, respectful care in a relationship is key for supporting early learning. This program provides PD opportunities and resources to ELC professionals through: Training of Trainers Institutes, PD academies, seminars, workshops, webinars, site-based training and coaching. The PITC promotes relationship-based care through six essential program policies: Primary Care, Small Groups, Continuity of Care, Individualized Care, Culturally Responsive Care, and Inclusive Care. Measure to Evaluate: When this approach is followed, programs will see the following outcomes: (1) Care in safe; engaging, and intimate settings; (2) Children having the time and the opportunity to establish and sustain secure and trusting relationships with infant care teachers and other children; and (3) Development of knowledgeable infant care teachers who are responsive to children's needs and interests.

The California Preventative Health and Safety Hubs have updated materials and trainings focused on disaster preparedness. This includes earthquakes, fires, the COVID-19 pandemic, and lead poisoning. The PD opportunities and resources can be found at the California Childcare Health Program located here: <a href="https://cchp.ucsf.edu/">https://cchp.ucsf.edu/</a>.

The links are checked for functionality at least daily on business days. This year, there were 96,408 page views and 34,852 users. Preventive Health and Safety Training materials were a top page view. They are mostly accessed in English (over 90%). Materials were also accessed in Spanish and Chinese.

The California Early Childhood Mentor Program (CECMP) supports the ELC workforce by providing mentor services to support the curriculum practicum efforts at 104 community colleges. During the Federal Fiscal Year (FFY) 2020-21, mentoring was provided virtually due to the COVID-19 pandemic. However, the CECMP program coordinators continued the four primary goals: (1) to provide community placements for community college Early Childhood Education students in their final practicum with certified Mentor teachers; (2) To provide directors in early childhood education the opportunity to receive mentoring from a certified Director Mentor, and provide mentor stipends; (3) build workforce capacity in leadership skills via several mechanisms; and (4) encourage leadership opportunities in mentoring, training, facilitating, advocacy, and community collaboration with Quality Counts California for compensation through stipends.

Although, FFY 2020-21 was a challenging year due to the COVID-19 pandemic, multiple layoffs, reduced funding, and the fact that all mentor related activities were online, the mentor program still managed to support activities at 79 of the 104 community colleges. Additionally, there were 342 teacher mentors and 51 director mentors for a total of 393 teacher and director mentors this year. There was a total of 1,140 students that received mentoring services towards their practicum this fiscal 2020-2021. There is currently an evaluation on the effectiveness of the CECMP happening. To that end, additional data about the progress made in the CECMP will be available June of 2022.

- 12. Lead agencies must submit an annual report, as required at 45 CFR § 98.53(f) (4), describing any changes to lead agency regulations, enforcement mechanisms, or other lead agency policies addressing health and safety based on an annual review and assessment of serious child injuries and any deaths occurring in child care programs receiving CCDF, and in other regulated and unregulated child care centers and family child care homes, to the extent possible.
- 12.1 Describe the annual review and assessment of serious injuries and any deaths occurring in child care programs receiving CCDF, and in other regulated and unregulated child care centers and family child care homes, to the extent possible.
  - For all licensed child care programs, regardless of CCDF, California Department of Social Services (CDSS) tracks the number and circumstances of deaths statewide.
     Due to the seriousness of any child death, the CDSS has been tracking child

deaths for the past decade. The CDSS tracks all reported fatalities that occur either in a licensed child care facility or the licensed child care was the last physical place of care.

- In recent years, more detailed information related to sleep-related infant fatalities is being collected. Sleep-related fatalities are categorized as deaths occurring in a licensed child care facility where the cause of death is listed as Sudden Infant Death Syndrome (SIDS) or Sudden Unexplained Infant Death Syndrome (SUIDS). Additionally, there are cases when the cause of death may be declared as "unknown" by the coroners' offices. These fatalities are counted in sleep-related fatalities if they contain an element of an unsafe sleeping environment.
- The aggregate data for reports regarding deaths in licensed facilities may be found at the following link: <u>Child Care Licensing Facility Fatality Report</u>.
- The CDSS-Child Care Licensing Division (CCLD) Child Care Licensing Program
  does not have sufficient data systems to collect and post information regarding
  serious injuries or substantiated instances of child abuse; however, the licensed
  facility inspection reports includes this information at the site level and is provided to
  the public on the <a href="Child Care Transparency">Child Care Transparency</a> webpage on the CDSS website.

## 12.2 Describe any changes to lead agency regulations, enforcement mechanisms, or other lead agency policies addressing health and safety based on the annual review and assessment.

- Effective August 19, 2020, the Department successfully passed the Safe Sleep Regulations. For Family Child Care Homes, these regulations can be found under Title 22, Division 12, Section 102352, Section 102417(d), Section 102425 and Section 102426. For Child Care Centers, these regulations can be found under Title 22, Division 12, Section 101239(r), Section 101419.2(b)(2), Section 101429, Section 101430, and Section 101439.1. The Department released Provider Information Notice (PIN) 20-24-CCP on September 15, 2020, which outlined the new regulations and provided licensees with a summary of the new requirements, links to the regulation text, and safe sleep resources.
- On July 28, 2021, the Department released <u>PIN 21-21-CCP</u>, which informed all licensed Child Care Center (CCC) licensees of the Written Directives that had been published in accordance to the requirements of Assembly Bill (AB) 2370 (Chapter 676, Statutes of 2018). The PIN contains the Written Directives, which have the same force and effect as Title 22 regulations. The PIN also contains two required forms; (1) the External Water Sampler Self-Certification Form; and (2) the Child Care Center Sampling Checklist Form, which must be completed to fulfill the requirements set forth in the Written Directives.
- As part of the Inspection Process Project (IPP), the Community Care Licensing Division (CCLD) has developed the Compliance and Regulatory Enforcement (CARE) Tools for use in all its programs, including the Child Care Licensing Program. The CARE tools will be used by Licensing Program Analysts (LPAs) when conducting inspections in licensed

facilities. The Child Care Program published <u>PIN 21-25-CCP</u> to announce the statewide launch of the CARF tool.

- The <u>Inspection Process Project</u> was initiated for the Department to better assure and promote the health, safety, and quality of life of each child accessing care in licensed settings. The Community Care Licensing Division (CCLD) focuses its efforts on three priority areas: prevention, compliance, and enforcement. In line with these efforts is improving the consistency, effectiveness, and quality of the inspection process throughout the state and across licensed facility categories.
- Before the full implementation of the Inspection Process Technical Support and Training Unit (TSTU) conducted a virtual training for 19 regional office's staff, advocates, technical support staff and sister training units. The IPP team finalized the Annual Inspection Tools in June 2021. A comprehensive in-person training plan was developed and implemented to provide CARE tool training for all Child Care staff and community partners adhering to local public health & safety Covid-19 guidance.
- Finally, the Department has published various <u>Provider Information Notices (PINs)</u> to provide guidance and information to child care facilities throughout the COVID-19 health crisis. Some notable PINs include:
  - PIN 21-24-CCP Governor's Executive Order N-12-21 Regarding Coronavirus Disease 2019 (COVID-19) and the Expiration of COVID-19 Waivers;
  - PIN 21-18-CCP Updated Coronavirus 2019 (COVID-19) Industry Guidance for Child Care Settings;
  - <u>PIN 21-14-CCP</u> Guidance for Applying for Child Care Licensure or Expanding Existing Operations for Previously Licensed Child Care Providers, Providers Who Have Provided Care Subject to a Waiver or License Exempt Status or Individuals Considering Providing Licensed Care;
  - PIN 21-08-CCP (Supersedes PIN 20-22-CCP) Updated COVID-19 Guidance For Cohorts, Group Size, And Ratios In Licensed & License-Exempt Child Care Settings; And Updated Guidance For County Risk Levels. Guidance And Frequently Asked Questions (FAQ) Regarding Individual Waivers Available For Licensed Child Care Facilities And License-Exempt Providers Due To Coronavirus Disease 2019 (COVID-19); and
  - <u>PIN 21-07-CCP</u> Statewide Waivers to Renew Pediatric CPR and First Aid Certifications Due to the Coronavirus Disease 2019 (COVID-19) Public Health Emergency.

### 13. American Rescue Plan (ARP) Act Child Care Stabilization Grants

Goal: To ensure the lead agency implements an equitable stabilization grant program. The American Rescue Plan (ARP) Act included approximately \$24 billion for child care stabilizationgrants, representing an important opportunity to stabilize the child care sector and do so in a way that builds back a stronger child care system that supports the developmental and learning needs of children, meets parents' needs and preferences with equal access to high-quality child care, and supports a professionalized workforce that is fairly and appropriately compensated for the essential skilled work that they do. Lead agencies must spend most stabilization funds as subgrants to qualified child care providers to support the stability of the child care sector duringand after the COVID-19 public health emergency. Section 13 should be used to report on ARP Stabilization Grants ONLY.

- 13.1 When did you start accepting applications? Enter Date: 9/16/21
- 13.2 When did the first grants go out to providers? Enter Date: 4/19/21
- 13.3 How many stabilization grants were awarded from October 1, 2020 to September 30, 2021?
  - ☑ Total # 20,030 stabilization grants were received through 12/7/2021
    - □ Licensed or registered center-based programs # 0
    - ∠ License-exempt center-based programs # 0
    - ∠ Licensed or registered family child care # 0
    - □ License-exempt family child care (care in providers' home) # 0
    - ☑ In-home (care in the child's own home) # 0
    - ☑ Programs already serving children who receive CCDF subsidy at time of application # 0

CDSS is not able to break down the number of grants by provider type.

13.4 What are the minimum, maximum, and average provider stabilization grant award amounts and average number of awards made to the same provider from October 1, 2020to September 30, 2021? Round amounts to the nearest dollar.

### A. Minimum provider amount:

- a. Licensed or registered center- based program: \$3500
- b. License-exempt center-based program; \$525
- c. Licensed or registered family child care: \$3500
- d. License-exempt family child care (care in the provider's home): \$525
- e. In-home (care in the child's own home): \$525

### B. Maximum provider amount:

- a. Licensed or registered center- based program: Because this was a perchild stipend and because many providers are paid through agencies, state level data is aggregated by agency, and unavailable at the provider level.
- b. License-exempt center-based program; Because this was a per-child stipend and because many providers are paid through agencies, state level data is

aggregated by agency, and unavailable at the provider level.

- c. Licensed or registered family child care: Because this was a per-child stipend and because many providers are paid through agencies, state level data is aggregated by agency, and unavailable at the provider level.
- d. License-exempt family child care (care in the provider's home): Because this was a per-child stipend and because many providers are paid through agencies, state level data is aggregated by agency, and unavailable at the provider level.
- e. In-home (care in the child's own home): Because this was a per-child stipend and because many providers are paid through agencies, state level data is aggregated by agency, and unavailable at the provider level.

### C. Average provider award amount:

- a. Licensed or registered center- based program: Because this was a perchild stipend and because many providers are paid through agencies, state level data is aggregated by agency, and unavailable at the provider level.
- b. License-exempt center-based program: Because this was a per-child stipend and because many providers are paid through agencies, state level data is aggregated by agency, and unavailable at the provider level.
- c. Licensed or registered family child care: Because this was a per-child stipend and because many providers are paid through agencies, state level data is aggregated by agency, and unavailable at the provider level.
- d. License-exempt family child care (care in the provider's home): Because this was a per-child stipend and because many providers are paid through agencies, state level data is aggregated by agency, and unavailable at the provider level.
- e. In-home (care in the child's own home): Because this was a per-child stipend and because many providers are paid through agencies, state level data is aggregated by agency, and unavailable at the provider level.

### D. Average number of awards made to the same provider during the fiscal year

- a. Licensed or registered center- based program: Because this was a perchild stipend and because many providers are paid through agencies, state level data is aggregated by agency, and unavailable at the provider level.
- b. License-exempt center-based program: Because this was a per-child stipend and because many providers are paid through agencies, state level data is aggregated by agency, and unavailable at the provider level.
- c. Licensed or registered family child care: Because this was a per-child stipend and because many providers are paid through agencies, state level data is aggregated by agency, and unavailable at the provider level.
- d. License-exempt family child care (care in the provider's home): Because this was a per-child stipend and because many providers are paid through agencies, state level data is aggregated by agency, and unavailable at the provider level.
- e. In-home (care in the child's own home): Because this was a per-child stipend and because many providers are paid through agencies, state level data is aggregated by agency, and unavailable at the provider level.

### stabilization grants served from October 1, 2020 to September 30, 2021?

States/Territories should use their own definition of age groups as provided in the CCDF Plan.

### A. Total

- a. Total: 289,379
- b. Licensed or registered center-based program: 207,716
- c. License-exempt center-based program: 3,698
- d. Licensed or registered family child care: 80,730
- e. License-exempt family child care (care in the provider's home): 2,089
- f. In-home (care in the child's own home): 0

#### B. Infants

- a. Total: 27,495
- b. Licensed or registered center-based program: 13,950
- c. License-exempt center-based program: 26
- d. Licensed or registered family child care: 13,482
- e. License-exempt family child care (care in the provider's home): 308
- f. In-home (care in the child's own home): 0

### C. Toddlers

- a. Total: 41,520
- b. Licensed or registered center-based program: 15,456
- c. License-exempt center-based program: 208
- d. Licensed or registered family child care: 26,021
- e. License-exempt family child care (care in the provider's home): 557
- f. In-home (care in the child's own home): 0

### D. Preschool

- a. Total: 155.041
- b. Licensed or registered center-based program: 134,9650
- c. License-exempt center-based program: 2,382
- d. Licensed or registered family child care: 19,397
- e. License-exempt family child care (care in the provider's home): 600
- f. In-home (care in the child's own home): 0

### E. School-age

- a. Total: 65.314
- b. Licensed or registered center-based program: 43,345
- c. License-exempt center-based program: 1,082
- d. Licensed or registered family child care: 21,830
- e. License-exempt family child care (care in the provider's home): 624
- f. In-home (care in the child's own home): 0

### F. Mixed age (combination of more than one age group)

- a. Total: 0
- b. Licensed or registered center-based program: 0
- c. License-exempt center-based program: 0
- d. Licensed or registered family child care: 0
- e. License-exempt family child care (care in the provider's home): 0
- f. In-home (care in the child's own home): 0

13.6 What is the number of stabilization grants awarded to providers who are operating in high need zip codes from October 1, 2020 to September 30, 2021? List the top 10 high need zip codes. Definition of high need may be defined as: (a) zip codes with highest proportion of children less than XX age, (b) high unemployment rate, (c) diverse racial composition.

- A. FIPS Code #1 number: 06025 Imperial County
  - a. Total: 110
  - b. Licensed or registered center-based programs: 34
  - c. License-exempt center-based programs: 0
  - d. Licensed or registered family child care: 71
  - e. License-exempt family child care (care in providers' home): 5
  - f. In-home care (care in the child's own home): 0
- B. FIPS Code #2 number: 06107 Tulare County
  - a. Total: 274
  - b. Licensed or registered center-based programs: 51
  - c. License-exempt center-based programs: 4
  - d. Licensed or registered family child care: 208
  - e. License-exempt family child care (care in providers' home): 11
  - f. In-home care (care in the child's own home): 0
- C. FIPS Code #3 number: 06019 Fresno County
  - a. Total: 404
  - b. Licensed or registered center-based programs: 184
  - c. License-exempt center-based programs: 2
  - d. Licensed or registered family child care: 187
  - e. License-exempt family child care (care in providers' home): 31
  - f. In-home care (care in the child's own home): 0
- D. FIPS Code #4 number: 06103 Tehama County
  - a. Total: 43
  - b. Licensed or registered center-based programs: 14
  - c. License-exempt center-based programs: 0
  - d. Licensed or registered family child care: 29
  - e. License-exempt family child care (care in providers' home): 0
  - f. In-home care (care in the child's own home): 0
- E. FIPS Code #5 number: 06047 Merced County
  - a. Total: 125
  - b. Licensed or registered center-based programs: 24
  - c. License-exempt center-based programs: 3
  - d. Licensed or registered family child care: 94
  - e. License-exempt family child care (care in providers' home): 4
  - f. In-home care (care in the child's own home): 0
- F. FIPS Code #6 number: 06073 Los Angeles County

- a. Total: 2,062
- b. Licensed or registered center-based programs: 826
- c. License-exempt center-based programs: 47
- d. Licensed or registered family child care: 1,130
- e. License-exempt family child care (care in providers' home): 59
- f. In-home care (care in the child's own home): 0
- G. FIPS Code #7 number: 06073 San Diego County
  - a. Total: 1,401
  - b. Licensed or registered center-based programs: 431
  - c. License-exempt center-based programs: 11
  - d. Licensed or registered family child care: 895
  - e. License-exempt family child care (care in providers' home): 64
  - f. In-home care (care in the child's own home) 0
- H. FIPS Code #8 number: 06059 Orange County
  - a. Total: 642
  - b. Licensed or registered center-based programs: 357
  - c. License-exempt center-based programs: 4
  - d. Licensed or registered family child care: 272
  - e. License-exempt family child care (care in providers' home): 9
  - f. In-home care 0
- I. FIPS Code #9 number: 06071 San Bernardino County
  - a. Total: 463
  - b. Licensed or registered center-based programs: 199
  - c. License-exempt center-based programs: 0
  - d. Licensed or registered family child care: 241
  - e. License-exempt family child care (care in providers' home): 23
  - f. In-home care 0
- J. FIPS Code #10 number: 06065 Riverside County
  - a. Total: 864
  - b. Licensed or registered center-based programs: 241
  - c. License-exempt center-based programs: 7
  - d. Licensed or registered family child care: 592
  - e. License-exempt family child care (care in providers' home): 24
  - f. In-home care: 0

# 13.7 How many grants were provided with the following specific uses from October 1, 2020 to September 30, 2021? (check all that apply and include number of grants provided)

- Mortgage/rent: Rent, mortgage, utilities, facility maintenance or improvements, insurance #: 8735
- Personnel costs: Personnel costs including any sole proprietor or independent contractor- employee benefits, premium pay, or costs for employee recruitment and

retention #: 6225 Supplies and services: Personal protective equipment cleaning and sanitization supplies and services, or training and professional development related to health and safety practices #: 8891 ☑ Purchases/Updates: Purchases of or updates to equipment and supplies to respond to the COVID-19 public health emergency #: 7960 ☐ Goods and services: Goods and services necessary to maintain or resume child careservices #: 8075 Mental health supports: Mental health supports for children and employees #: 2461 13.8 Did you run more than one grant program? If so, list the number of separate grant programs and describe their uses. Yes. Describe: California ran more than one grant program. Here is a summary of all of the ARPA Stabilization Subgrant Programs administered during this period: 1. Stipends for subsidized providers: Stipends were issued in two rounds: the first was issued in Spring 2021 based on November 2020 enrollment data; the second was issued in Fall 2021 based on March 2021 enrollment data. 2. Stipends for licensed providers: Licensed Stabilization Stipends were issued to all providers with an active license as of June 2021, regardless of whether they served children receiving subsidies. 3. Supplemental payment based on families' certified need: This subgrant consists of a supplemental payment for the stabilization of providers' income that is calculated using data based on families' certified need regardless of attendance. 4. Paid nonoperational days: This subgrant allows providers to receive a supplemental payment for closure days when they have to close for COVID-19 related reasons. ☐ No 13.9 Check which of the following methods were used for implementing stabilization grants from October 1, 2020 to September 30, 2021? (check all that

apply)

Prioritizing small child care programs

Providing bonuses or supplemental funding for providers meeting

☐ Recurring subgrants

certain needs of families

☐ Other (Describe):

☐ Multiple subgrant programs

# 13.10 Check which of the following were available to providers related to applying for stabilization grants from October 1, 2020 to September 30, 2021? (check all that apply)

| Applications for subgrants are widely available in plain language and multiple languages   |
|--|
| ☑ A staffed helpline or chat function to provide real time assistance for completing applications available in multiple languages  |
| ☐ Support for collecting documentation showing operating expenses  |
| ☐ Used a cost estimation model or survey to estimate operating expenses for or alreadycollected operating expenses from providers as part of an earlier application or reliefeffort instead of requiring new information from applicants |
| ☐ Acceptance of a variety of types of documentation of operating expenses  |
| ⊠Resources such as frequently asked questions to help with the completion of the applications available in multiple languages  |
| ☑ Partnerships with culturally relevant organizations and trusted messengers to<br>support adiverse range of child care providers in navigating the application<br>process   |
| ☐ Other (Describe).  |

## 13.11 Check which of the following supports were available to providers after they received stabilization grants from October 1, 2020 to September 30, 2021? (check all that apply)

- A staffed helpline or chat function to provide real time assistance available in multiplelanguages
- Support for providers related to following certain health and safety guidelines
- Support for providers related to continuing to pay full compensation to staff
- Support for providers related to recruiting and retaining existing and former child care workers and strengthening the diversity of the workforce to meet children and families'needs
- Support for providers related to providing relief from copayments and tuition for parentsstruggling to afford child care
- Support for providers in making facilities improvements needed to comply with safetyguidance in the context of developmentally appropriate practice and a welcoming environment for children and families
- Support for providers in making facilities improvements that make child care programs inclusive and accessible to children with disabilities and family members with disabilities
- Support for background checks and health and safety training for provides who were previously ineligible for CCDF subsidies because they had not completed the health andsafety requirements in the CCDBG Act
- Support for providers to find personal protective equipment (PPE), cleaning andsanitization supplies
- Support for providers related to finding mental health services and supports

| ☐ Other (Describe) |
|--------------------|
|--------------------|

13.12 Describe the methods used to eliminate fraud, waste, and abuse when providing stabilization grants from October 1, 2020 to September 30, 2021 (e.g., validated identity through the lead agency licensing system or conducted identity verification through a data match with state tax records):

Data was validated through the lead agency licensing system and through monthly enrollment data verified by local administrators.

### 13.13 Provider Demographics

- 13. 13.1 What is the number of <u>stabilization grants awarded by gender of center director or family child care owner</u> from October 1, 2020, to September 30, 2021?
  - A. Female:
    - a. Total: 10947
    - b. Licensed of registered center-based programs: 3739
    - c. License-exempt center-based programs:146
    - d. Licensed or registered family child care: 6687
    - e. License-exempt family child care (care in the providers' home): 375
    - f. In-home (care in the child's own home): 0
  - B. Male:
- a. Total: 348
- b. Licensed of registered center-based programs: 191
- c. License-exempt center-based programs: 11
- d. Licensed or registered family child care: 119
- e. License-exempt family child care (care in the providers' home): 27
- f. In-home (care in the child's own home): 0
- C. Non-binary
  - a. Total: 7
  - b. Licensed of registered center-based programs: 4
  - c. License-exempt center-based programs: 0
  - d. Licensed or registered family child care: 3
  - e. License-exempt family child care (care in the providers' home): 0
  - f. In-home (care in the child's own home): 0
- D. No response:
  - a. Total: 681
  - b. Licensed of registered center-based programs: 463
  - c. License-exempt center-based programs: 27
  - d. Licensed or registered family child care: 179
  - e. License-exempt family child care (care in the providers' home): 12
  - f. In-home (care in the child's own home): 0
- 13.13.2 What is the <u>number of stabilization grants awarded by race and ethnicity of theowner of the child care business</u> from October 1, 2020 to September 30, 2021?

- A. Ethnicity: Hispanic, Race: American Indian or Alaskan Native:
  - a. Total: 142
  - b. Licensed of registered center-based programs: # 41
  - c. License-exempt center-based programs: #3
  - d. Licensed or registered family child care: # 93
  - e. License-exempt family child care (care in the providers' home): # 5
  - f. In-home (care in the child's own home): # 0
- B. Ethnicity: Hispanic, Race Asian:
  - a. Total: 25
  - b. Licensed of registered center-based programs: # 11
  - c. License-exempt center-based programs: # 0
  - d. Licensed or registered family child care: # 14
  - e. License-exempt family child care (care in the providers' home): # 0
  - f. In-home (care in the child's own home): # 0
- C. Ethnicity: Hispanic, Race: Black or African American:
  - a. Total: 50
  - b. Licensed of registered center-based programs: # 18
  - c. License-exempt center-based programs: # 0
  - d. Licensed or registered family child care: # 31
  - e. License-exempt family child care (care in the providers' home): #1
  - f. In-home (care in the child's own home): # 0
- D. Ethnicity: Hispanic, Race: Native Hawaiian or Pacific Islander:
  - a. Total: 17
  - b. Licensed of registered center-based programs: # 2
  - c. License-exempt center-based programs: # 0
  - d. Licensed or registered family child care: # 14
  - e. License-exempt family child care (care in the providers' home): #1
  - f. In-home (care in the child's own home): # 0
- E. Ethnicity: Hispanic, Race: White:
  - a. Total: 2847
  - b. Licensed of registered center-based programs: #716
  - c. License-exempt center-based programs: # 26
  - d. Licensed or registered family child care: # 1,970
  - e. License-exempt family child care (care in the providers' home): # 135
  - f. In-home (care in the child's own home): # 0
- F. Ethnicity: Hispanic, Race: Multi-Racial:
  - a. Total: 82
  - b. Licensed of registered center-based programs: # 25
  - c. License-exempt center-based programs: #1
  - d. Licensed or registered family child care: # 53
  - e. License-exempt family child care (care in the providers' home): #3
  - f. In-home (care in the child's own home): # 0
- G. Ethnicity: Non-Hispanic, Race: American Indian or Alaskan Native:
  - a. Total: 36
  - b. Licensed of registered center-based programs: # 14
  - c. License-exempt center-based programs: #1

- d. Licensed or registered family child care: # 17
- e. License-exempt family child care (care in the providers' home): #3
- f. In-home (care in the child's own home): # 0
- H. Ethnicity: Non-Hispanic, Race: Asian:
  - a. Total: 1,032
  - b. Licensed of registered center-based programs: # 397
  - c. License-exempt center-based programs: #9
  - d. Licensed or registered family child care: # 615
  - e. License-exempt family child care (care in the providers' home): # 11
  - f. In-home (care in the child's own home): # 0
- I. Ethnicity: Non-Hispanic, Race: Black or African American:
  - a. Total: 1,275
  - b. Licensed of registered center-based programs: # 244
  - c. License-exempt center-based programs: # 15
  - d. Licensed or registered family child care: # 948
  - e. License-exempt family child care (care in the providers' home): #68
  - f. In-home (care in the child's own home): # 0
- J. Ethnicity: Non-Hispanic, Race: Native Hawaiian or Pacific Islander:
  - a. Total: 38
  - b. Licensed of registered center-based programs: # 16
  - c. License-exempt center-based programs: # 3
  - d. Licensed or registered family child care: # 18
  - e. License-exempt family child care (care in the providers' home): #1
  - f. In-home (care in the child's own home): # 0
- K. Ethnicity: Non-Hispanic, Race: White:
  - a. Total: 3,305
  - b. Licensed of registered center-based programs: # 1,716
  - c. License-exempt center-based programs: # 69
  - d. Licensed or registered family child care: # 1,468
  - e. License-exempt family child care (care in the providers' home): # 52
  - f. In-home (care in the child's own home): # 0
- L. Ethnicity: Non-Hispanic, Race: Multi-Racial:
  - a. Total: 238
  - b. Licensed of registered center-based programs: #85
  - c. License-exempt center-based programs: # 2
  - d. Licensed or registered family child care: # 144
  - e. License-exempt family child care (care in the providers' home): #7
  - f. In-home (care in the child's own home): # 0